NHS Data Model and Dictionary



Type: Data Dictionary Change Notice

 Reference:
 1808

 Version No:
 1.0

Subject: Correction of Format/Length Data Elements

Effective Date: Immediate

Reason for Change: Data Element format/length corrections to align with XML Schema and Technical Output

Specifications

Publication Date: 15 February 2021

Background:

The NHS Data Model and Dictionary aims to reuse defined data items where possible, to reduce burden and enable easier data linkage.

However, several data items within the NHS Data Model and Dictionary which are shared by many data sets, were defined before the most recent editorial principles for the specification of Format/Length of Data Elements were adopted. For example, Data Element EPISODE NUMBER was historically defined as 'n2', when in fact the data sets carrying this data item allow a maximum of two numeric characters.

Pages describing this mismatch have been included within the NHS Data Model and Dictionary as 'XML Schema Constraints' or 'Data Set Constraints' relating to each data set. However the maintenance of these pages has become more onerous as the scope of the NHS Data Model and Dictionary has extended.

The NHS Data Model and Dictionary Service have undertaken a review of all the affected items and data sets, and it has been decided that it is now possible to update the Format/Length on these data items with no practical impact on users of these data sets, as Technical Output Specifications are unaffected, having already been updated with the correct format/length during data set development.

For information, the data sets affected by this piece of work are:

- · Community Services Data Set
- · Commissioning Data Set
- Devices Patient Level Contract Monitoring Data Set
- Drugs Patient Level Contract Monitoring Data Set
- Maternity Services Data Set
- Mental Health Services Data Set
- · Patient Level Contract Monitoring Data Set.

It has also been decided to introduce replacement data items where the original items are named incorrectly and do not reflect the specifics of collection. These Data Elements are:

- HOSPITAL PROVIDER SPELL IDENTIFIER (to replace HOSPITAL PROVIDER SPELL NUMBER)
- OUT-PATIENT ATTENDANCE IDENTIFIER (to replace ATTENDANCE IDENTIFIER).

These new Data Elements will be used going forward, to replace instances of the originals in affected data sets. There is no difference between the old and new data item definitions.

Summary of changes:

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 Changed Description

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CLINICAL INVESTIGATION RESULT ITEM Changed Attributes

Attribute Definitions

CDS INTERCHANGE TEST INDICATOR
ORGAN SUPPORT MAXIMUM
New Attribute

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ADVANCED CARDIOVASCULAR SUPPORT DAYS Changed Description ADVANCED RESPIRATORY SUPPORT DAYS Changed Description AGE AT CDS ACTIVITY DATE **Changed Description** AGE ON ADMISSION **Changed Description ATTENDANCE IDENTIFIER** Changed Description **BASIC CARDIOVASCULAR SUPPORT DAYS** Changed Description **BASIC RESPIRATORY SUPPORT DAYS Changed Description BIRTH WEIGHT Changed Description** CDS INTERCHANGE APPLICATION REFERENCE **Changed Description**

CDS INTERCHANGE CONTROL COUNT CDS INTERCHANGE CONTROL REFERENCE CDS INTERCHANGE RECEIVER IDENTITY CDS INTERCHANGE SENDER IDENTITY CDS MESSAGE REFERENCE **CDS RECORD IDENTIFIER** CDS UNIQUE IDENTIFIER COMMISSIONER REFERENCE NUMBER COMMISSIONING SERIAL NUMBER CRITICAL CARE LEVEL 2 DAYS CRITICAL CARE LEVEL 3 DAYS CRITICAL CARE LOCAL IDENTIFIER **DERMATOLOGICAL SUPPORT DAYS DURATION OF ELECTIVE WAIT EPISODE NUMBER GASTRO-INTESTINAL SUPPORT DAYS GESTATION LENGTH (ASSESSMENT) GESTATION LENGTH (AT DELIVERY) GESTATION LENGTH (LABOUR ONSET) HOSPITAL PROVIDER SPELL IDENTIFIER HOSPITAL PROVIDER SPELL NUMBER LIVER SUPPORT DAYS** NEUROLOGICAL SUPPORT DAYS NHS SERVICE AGREEMENT LINE NUMBER ORGAN SUPPORT MAXIMUM

OUTPATIENT ATTENDANCE IDENTIFIER
PROVIDER REFERENCE NUMBER
RENAL SUPPORT DAYS

XML Schema Constraint

COMMISSIONING DATA SET VERSION 6-2-1 XML SCHEMA CONSTRAINTS Changed Description COMMISSIONING DATA SET VERSION 6-2-2 XML SCHEMA CONSTRAINTS Changed Description COMMISSIONING DATA SET VERSION 6-2-3 XML SCHEMA CONSTRAINTS Changed Description COMMISSIONING DATA SET VERSION 6-2 XML SCHEMA CONSTRAINTS Changed Description **COMMUNITY SERVICES DATA SET CONSTRAINTS** Changed Description DEVICES PATIENT LEVEL CONTRACT MONITORING DATA SET CONSTRAINTS Changed Description DRUGS PATIENT LEVEL CONTRACT MONITORING DATA SET CONSTRAINTS Changed Description HIV AND AIDS REPORTING DATA SET XML SCHEMA CONSTRAINTS **Changed Description** MATERNITY SERVICES DATA SET CONSTRAINTS (RETIRED) renamed from MATERNITY SERVICES DATA SET Changed status to Retired. **CONSTRAINTS** Name, Description MENTAL HEALTH SERVICES DATA SET CONSTRAINTS Changed Description NATIONAL NEONATAL DATA SET CONSTRAINTS New XML Schema Constraint PATIENT LEVEL CONTRACT MONITORING DATA SET CONSTRAINTS **Changed Description** PLICS ACUTE ADMITTED PATIENT CARE DATA SET CONSTRAINTS **Changed Description** PLICS MENTAL HEALTH ADMITTED PATIENT CARE DATA SET CONSTRAINTS **Changed Description**

Changed Description

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Changed Description

Changed Description

Changed Description

Changed Description

Changed Description

Changed Description

Changed Description

Changed Description

New Data Element

Changed Description

Changed Description

Attribute

Changed Description, linked

New Data Element

Date: 15 February 2021

Sponsor: Nicholas Oughtibridge, Head of Clinical Data Architecture, NHS Digital

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.

CLINICAL DATA SETS MESSAGE DOCUMENTATION

Change to Supporting Information: Changed Description

XML Schema Download:

XML Schema TRUD Download

XML Schema Constraints:

- <u>Cancer Outcomes and Services Data Set XML Schema Constraints</u>
- Diagnostic Imaging Data Set XML Schema Constraints
- HIV and AIDS Reporting Data Set XML Schema Constraints

Data Set Constraints:

- Community Services Data Set Constraints
- Improving Access to Psychological Therapies Data Set Constraints

- Maternity Services Data Set Constraints
- Mental Health Services Data Set Constraints
- · National Neonatal Data Set Constraints
- Systemic Anti-Cancer Therapy Data Set Constraints

CLINICAL DATA SETS MESSAGE DOCUMENTATION MENU

Change to Supporting Information: Changed Description

Clinical Data Sets Menu

XML Schema Download:

XML Schema TRUD Download

XML Schema Constraints:

- · Cancer Outcomes and Services
- Diagnostic Imaging
- HIV and AIDS

Data Set Constraints:

- Community Services
- Improving Access to Psychological Therapies
- Maternity Services
- Mental Health Services
- · National Neonatal Data Set
- Systemic Anti-Cancer Therapy

MATERNITY SERVICES DATA SET OVERVIEW

Change to Supporting Information: Changed Description

Introduction

The <u>Maternity Services Data Set</u> (<u>MSDS</u>) is a <u>PATIENT</u>-level data set that captures key information at each stage of the maternity care pathway including mother's demographics, <u>Antenatal Booking Appointments</u>, admissions and re-admissions, <u>Screening Tests</u>, <u>Labour and Delivery</u> along with baby's demographics, admissions, diagnoses and <u>Screening Tests</u>.

As a secondary uses data set the <u>Maternity Services Data Set</u> re-uses clinical and operational data for purposes other than direct <u>PATIENT</u> care. It defines the data items, definitions and associated value sets extracted or derived from local information systems.

The <u>Maternity Services Data Set</u> is designed to meet requirements that resulted from the <u>National Maternity Review</u>, which led to the publication of the <u>Better Births</u> report in February 2016. <u>Better Births</u> highlighted the need for <u>Maternity Services</u> in England to become safer, more personalised and provide better access to information for pregnant women. The publication of <u>Better Births</u> resulted in the establishment of the <u>Maternity Transformation Programme</u>, and the data set forms part of the 'Sharing Data and Information' workstream of the programme.

Data Collection

The Maternity Services Data Set collects information on each stage of care for women as they go through pregnancy.

The <u>Maternity Services Data Set Information Standards Notice (ISN)</u> mandates the central flow of administrative and clinical information for secondary uses purposes. The scope of the data set includes all <u>ACTIVITY</u> carried out by NHS-funded <u>Maternity Services</u> relating to the mother and baby or babies, from the point of the first <u>Antenatal Booking Appointment</u> until the mother and baby are discharged from <u>Maternity Services</u>.

The Maternity Services Data Set provides the definitions for data:

- to be lodged in the central data warehouse regularly and routinely e.g. monthly. Extracts will be taken at prearranged intervals for publication
- to be assembled, compiled and to flow into a secondary uses data warehouse
- to provide timely, pseudonymised PATIENT-based data and information for purposes other than direct clinical care, e.g. planning, commissioning, public health, clinical audit, performance improvement, research, clinical governance.

The Maternity Services Data Set enables standardised collection of data from various services to be assembled for reporting purposes.

Submission information

The Maternity Services Data Set is submitted centrally via the Data Processing Services (DPS) maintained by NHS Digital.

The Maternity Services Data Set is submitted to NHS Digital using the Maternity Services Data Set XML Schema.

A conversion tool has also been developed which enables the loading or copying of data into the provided table structure. Once populated, the tool can export the data in the required XML format, ready for submission.

Format information

Data for submission will be formatted into an XML file as per <u>Technology Reference Data Update Distribution (TRUD)</u> at: <u>NHS Data Model and Dictionary: DD XML Schemas.</u>

For enquiries regarding the XML Schema, please contact NHS Digital at enquiries@nhsdigital.nhs.uk.

Further guidance

Further guidance has been produced by NHS Digital and is available at Maternity Services Data Set.

Mandation

The Mandation column indicates the recommendation for the inclusion of data:

- M = Mandatory: this data element is mandatory and the technical process (e.g. submission of the data set, production of output etc) cannot be completed without this data element being present
- R = Required: NHS business processes cannot be delivered without this data element
- O = Optional: the inclusion of this data element is optional as required for local purposes.

Data Set Constraints

For guidance on the Data Set constraints, see the Maternity Services Data Set Constraints.

XML Schema

For guidance on downloading the XML Schema, see XML Schema TRUD Download.

CLINICAL INVESTIGATION RESULT ITEM

Change to Class: Changed Attributes

Attributes of this Class are:

K INVESTIGATION RESULT DATE

ABNORMALITY DETECTED INDICATOR
ACUTE MYELOID LEUKAEMIA RISK FACTORS

ALK GENE FUSION STATUS

ANKLE DORSIFLEXION CODE FOR PRIMARY ANKLE REPLACEMENT
ANKLE PLANTARFLEXION CODE FOR PRIMARY ANKLE REPLACEMENT

BLOOD PRODUCTS REQUIRED FOLLOWING OESOPHAGECTOMY INDICATION CODE

BREAST BIOPSY REFERRAL OUTCOME BREAST CANCER HISTOLOGICAL TYPE

BREAST PROGESTERONE RECEPTOR STATUS

BREAST SCREENING MAMMOGRAPHY OUTCOME CODE

BRONCHOSCOPY PERFORMED TYPE

CANCER SPECIMEN NATURE

CANCER SURGICAL ADMISSION TYPE

CANCER VASCULAR OR LYMPHATIC INVASION

CENTRAL TONE STATUS

CERVICAL GLANDULAR INTRAEPITHELIAL NEOPLASIA PRESENCE AND GRADE

CHLAMYDIA TEST RESULT
CLINICAL FRAILTY SCALE POINT

CLINICAL INVESTIGATION ITEM TYPE

CLINICAL INVESTIGATION RESULT ANALYSED DATE

CLINICAL INVESTIGATION RESULT RECEIVED DATE

CLINICAL INVESTIGATION RESULT VALUE

CONDITION SEEN IN ABDOMEN DURING XRAY

CYSTIC PERIVENTRICULAR LEUKOMALACIA OBSERVED DURING CRANIAL ULTRASOUND SCAN INDICATOR

CYTOGENETIC ABNORMALITY RISK GROUP

CYTOGENETIC ANALYSIS CODE

CYTOGENETIC PRESENCE TYPE FOR RHABDOMYOSARCOMA

CYTOGENETIC RISK GROUP FOR PAEDIATRIC MOLECULAR GENETIC ABNORMALITIES

DEGREES OF FIXED FLEXION DEFORMITY FOR PRIMARY KNEE REPLACEMENT

DEGREES OF FLEXION RANGE FOR PRIMARY KNEE REPLACEMENT

DETRUSOR MUSCLE PRESENCE INDICATION CODE

EPIDERMAL GROWTH FACTOR RECEPTOR MUTATIONAL STATUS

ESTROGEN RECEPTOR STATUS

EUROPEAN LEUKAEMIA NET GENETIC RISK CODE

EXCISION MARGIN INDICATION CODE

FINDING SCHEME IN USE

GENETIC CONFIRMATION INDICATOR

GRADE OF DIFFERENTIATION

GYNAECOLOGICIAL CANCER SITE OF PERITONEAL INVOLVEMENT

HAEMOGLOBINOPATHY INVESTIGATION RESULT CODE FOR NATIONAL NEONATAL DATA SET

HEPATITIS B INFECTION INDICATION CODE

HEPATITIS C INFECTION INDICATION CODE

HORMONE EXPRESSION TYPE

HUMAN EPIDERMAL GROWTH FACTOR IN SITU HYBRIDISATION RECEPTOR STATUS FOR BREAST

HUMAN EPIDERMAL GROWTH FACTOR RECEPTOR STATUS FOR BREAST

HUMAN PAPILLOMAVIRUS IN SITU HYBRIDISATION TEST RESULT

IMMUNOHISTOCHEMISTRY NUCLEAR EXPRESSION INTACT INDICATION CODE

INTRAVENTRICULAR HAEMORRHAGE GRADE

INVASIVE CANCER SPECIAL TYPE INDICATOR

INVESTIGATION EXAMINATION RESULT

INVESTIGATION RUBELLA RESULT INDICATOR

LEUKAEMIC CELLS PRESENT POST MINIMAL RESIDUAL DISEASE INDUCTION PERCENTAGE

LYMPH NODE STATUS

METASTASIS EXTENT CODE

MICROSATELLITE INSTABILITY TESTING RESULT

MICROSCOPIC INVOLVEMENT INDICATION CODE FOR FALLOPIAN TUBE OR OVARIAN CANCER

MICROSCOPIC INVOLVEMENT INDICATION CODE FOR UTERINE SEROSA

MICROSCOPIC INVOLVEMENT INDICATOR FOR PARAMETRIUM OR CERVICAL STROMA

MICROSCOPIC INVOLVEMENT INDICATOR FOR VAGINAL

NEWBORN BLOOD SPOT TEST OUTCOME STATUS

NEWBORN HEARING AUDIOLOGY OUTCOME

NEWBORN HEARING SCREENING OUTCOME

NEWBORN HEARING SCREENING OUTCOME FOR NATIONAL NEONATAL DATA SET

NUMBER OF FETUSES

OBSERVATION VALUE

OESOPHAGECTOMY OESOPHAGEAL CONDUIT NECROSIS FAILURE TYPE

OESOPHAGOENTERIC LEAK SEVERITY TYPE

ORGAN SUPPORT MAXIMUM

OTHER NON BREAST LOCALLY ADVANCED METASTATIC MALIGNANCY INDICATOR

P16 IMMUNOHISTOCHEMISTRY TEST RESULT

PAEDIATRIC MYELODYSPLASIA CLINICAL FINDINGS

PATHOLOGICAL RISK CLASSIFICATION CODE AFTER NEPHRECTOMY

PATHOLOGICAL RISK CLASSIFICATION CODE AFTER PREOPERATIVE CHEMOTHERAPY

PD L1 EXPRESSION PERCENTAGE

PERINEURAL INVASION INDICATOR FOR SKIN

PERINEURAL INVASION INDICATOR FOR UROLOGICAL

PERITONEAL INVOLVEMENT INDICATION CODE

PERSON BLOOD GROUP

PERSON GENOTYPIC SEX FOR NATIONAL NEONATAL DATA SET

PERSON RHESUS FACTOR

PORENCEPHALIC CYST VISIBLE DURING CRANIAL ULTRASOUND SCAN INDICATOR

PREOPERATIVE THERAPY RESPONSE TYPE

RECURRENT LARYNGEAL NERVE INJURY INVOLVEMENT TYPE

RENAL VEIN TUMOUR INDICATOR FOR PAEDIATRIC KIDNEY

RENAL VEIN TUMOUR THROMBUS INDICATION CODE FOR UROLOGICAL

RETINOPATHY OF PREMATURITY CLOCK HOURS MAXIMUM STAGE

RETINOPATHY OF PREMATURITY MAXIMUM ZONE

RETINOPATHY OF PREMATURITY PLUS DISEASE STATUS

RETINOPATHY OF PREMATURITY STAGE

ROS1 FUSION STATUS

S CATEGORY CODE

SENTINEL LYMPH NODE BIOPSY OUTCOME

SITUATION SCHEME IN USE

SPLENOMEGALY INDICATOR

SUBTALAR JOINT MOVEMENT CODE FOR PRIMARY ANKLE REPLACEMENT

TIBIA HINDFOOT ALIGNMENT CODE FOR PRIMARY ANKLE REPLACEMENT

TUMOUR NECROSIS

TUMOUR NECROSIS INDICATION CODE

UNIT OF MEASURE

VENTRICULAR DILATION DIAGNOSED DURING CRANIAL ULTRASOUND SCAN INDICATOR

VIABLE TUMOUR EVIDENCE AT RESECTION MARGIN

VISUAL ACUITY OR FIELD TEST RESULT

CDS INTERCHANGE TEST INDICATOR

Change to Attribute: Changed Description

An indication of whether the Commissioning Data Set Interchange is a production or test Interchange.

Note: Any <u>CDS INTERCHANGE TEST INDICATOR</u> not populated, or populated with any code other than the specified National Codes will be treated as Production data.

National Codes:

- 1 The whole Interchange contains Test data
- O The whole Interchange contains Production data

(zero) 0

The whole Interchange contains Production data

ORGAN SUPPORT MAXIMUM

Change to Attribute: New Attribute

The maximum number of ORGAN SYSTEMS SUPPORTED on any one day during a CRITICAL CARE PERIOD.

- · Each organ system can only be counted once on any calendar day.
- · Both basic and advanced categories cannot be counted at the same time.
- The number of organ systems supported can be between 00 to 07, although for the purposes of recording on the Commissioning Data Set messages Gastro-intestinal support days are not recorded within the count.

<u>ORGAN SUPPORT MAXIMUM</u> is derived by counting the maximum number of <u>ACTIVITY PROPERTIES</u> where the <u>ORGAN SYSTEM SUPPORTED</u> is different, for each day of the <u>CRITICAL CARE PERIOD</u> and reporting the highest number.

Each <u>ACTIVITY PROPERTY</u> will have one or more <u>ACTIVITY PROPERTY EFFECTIVE DATES</u> and <u>ACTIVITY PROPERTY END DATES</u> within the <u>CRITICAL CARE PERIOD</u>. Both basic and advanced categories cannot be counted at the same time therefore the maximum number of systems supported is 7.

This attribute is also known by these names:

Context	Alias			
plural	ORGAN SUPPORT MAXIMUMS			

ORGAN SUPPORT MAXIMUM

Change to Attribute: New Attribute

ORGAN SUPPORT MAXIMUM

Data Elements:

ORGAN SUPPORT MAXIMUM

ADVANCED CARDIOVASCULAR SUPPORT DAYS

Change to Data Element: Changed Description

Format/Length:	n3
Format/Length:	max an3
National Codes:	

National Codes:

Default Codes: 998 - 998 or more days of advanced cardiovascular support

999 - occurred but day count not known 999 - Occurred but day count not known

Notes:

ADVANCED CARDIOVASCULAR SUPPORT DAYS is the total number of days that the <u>PATIENT</u> received advanced cardiovascular support during a <u>CRITICAL CARE PERIOD</u>, ranging from 000 to 997 days. <u>ADVANCED CARDIOVASCULAR SUPPORT DAYS</u> is the same as attribute <u>ACTIVITY DURATION</u>.

ADVANCED CARDIOVASCULAR SUPPORT DAYS is the total number of days that the <u>PATIENT</u> received advanced cardiovascular support during a <u>CRITICAL CARE PERIOD</u>, ranging from 0 to 997 days.

ADVANCED CARDIOVASCULAR SUPPORT DAYS is derived from the difference between the ACTIVITY PROPERTY EFFECTIVE DATE and the ACTIVITY PROPERTY END DATE for all ACTIVITY PROPERTIES where the ORGAN SYSTEM SUPPORTED is National Code 'Advanced Cardiovascular Support' within the CRITICAL CARE PERIOD.

ADVANCED CARDIOVASCULAR SUPPORT DAYS is used by the Secondary Uses Service to derive the Healthcare Resource Group 4. Failure to correctly populate this data element is likely to result in an incorrect Healthcare Resource Group, usually associated with lower levels of healthcare resource.

For further information, please refer to the NHS Digital website at: Payment by Results Guidance.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

ADVANCED RESPIRATORY SUPPORT DAYS

Change to Data Element: Changed Description

Format/Length:

Format/Length:

max an3

National Codes:

Default Codes:

998 - 998 or more days of advanced respiratory support

999 - occurred but day count not known

999 - Occurred but day count not known

Notes:

ADVANCED RESPIRATORY SUPPORT DAYS is the total number of days that the PATIENT received advanced respiratory support during a CRITICAL CARE PERIOD, ranging from 000 to 997 days. ADVANCED RESPIRATORY SUPPORT DAYS is the same as attribute ACTIVITY DURATION.

ADVANCED RESPIRATORY SUPPORT DAYS is the total number of days that the PATIENT received advanced respiratory support during a CRITICAL CARE PERIOD, ranging from 0 to 997 days.

ADVANCED RESPIRATORY SUPPORT DAYS is derived from the difference between the ACTIVITY PROPERTY EFFECTIVE DATE and the ACTIVITY PROPERTY END DATE for all ACTIVITY PROPERTIES where the ORGAN SYSTEM SUPPORTED is National Code 'Advanced Respiratory Support' within the CRITICAL CARE PERIOD.

ADVANCED RESPIRATORY SUPPORT DAYS is used by the Secondary Uses Service to derive the Healthcare Resource Group 4. Failure to correctly populate this data element is likely to result in an incorrect Healthcare Resource Group, usually associated with lower levels of healthcare resource.

For further information, please refer to the NHS Digital website at: Payment by Results Guidance.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

AGE AT CDS ACTIVITY DATE

Change to Data Element: Changed Description

Format/Length:	n3
Format/Length:	max an3
National Codes:	
Default Codes:	999 - Not known i.e. date of birth not known and age cannot be estimated

Notes

AGE AT CDS ACTIVITY DATE is the same as attribute PERSON AGE.

 $\overline{\text{AGE AT CDS ACTIVITY DATE}}$ is derived as the number of completed years between the $\overline{\text{PERSON BIRTH DATE}}$ of the $\overline{\text{PATIENT}}$ and the $\overline{\text{CDS}}$ $\overline{\text{ACTIVITY DATE}}$.

AGE AT CDS ACTIVITY DATE is used by the Secondary Uses Service to derive the Healthcare Resource Group 4. Failure to correctly populate this data element is likely to result in an incorrect Healthcare Resource Group, usually associated with lower levels of healthcare resource.

For further information, please refer to the NHS Digital website at: Payment by Results Guidance. For further information, please refer to the NHS Digital website at: Payment by Results Guidance.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

AGE ON ADMISSION

Change to Data Element: Changed Description

Format/Length:	n3
Format/Length:	max an3
National Codes:	
Default Codes:	999 - Not known i.e. date of birth not known and age cannot be estimated

Notes:

AGE ON ADMISSION is the same as attribute PERSON AGE.

AGE ON ADMISSION is derived as the number of completed years between the PERSON BIRTH DATE of the PATIENT and the START DATE (HOSPITAL PROVIDER SPELL).

AGE ON ADMISSION is used by the Secondary Uses Service to derive the Healthcare Resource Group 4. Failure to correctly populate this data element is likely to result in an incorrect Healthcare Resource Group, usually associated with lower levels of healthcare resource.

For further information, please refer to the NHS Digital website at: Payment by Results Guidance.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

ATTENDANCE IDENTIFIER

Change to Data Element: Changed Description

Format/Length: an12
Format/Length: max an12
National Codes:
Default Codes:

Notes:

ATTENDANCE IDENTIFIER is the ACTIVITY IDENTIFIER for the attendance. ATTENDANCE IDENTIFIER is the same as attribute ACTIVITY IDENTIFIER for the attendance.

ATTENDANCE IDENTIFIER is a sequential number or time of day used to enable an attendance to be uniquely identified.

If a <u>PATIENT</u> is seen by a doctor, sent elsewhere for a test or X-ray and then seen again by a doctor of the same <u>CONSULTANT</u>'s firm during the same clinic session, it would be recorded as one attendance - not two.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

ATTENDANCE IDENTIFIER will be replaced with OUTPATIENT ATTENDANCE IDENTIFIER, which is the most recent approved national information standard to describe the required definition.

BASIC CARDIOVASCULAR SUPPORT DAYS

Change to Data Element: Changed Description

Format/Length:
Pormat/Length:
max an3

National Codes:

Default Codes:

998 - 998 or more days of basic cardiovascular support
999 - occurred but day count not known
999 - Occurred but day count not known

Notes:

BASIC CARDIOVASCULAR SUPPORT DAYS is the total number of days that the PATIENT received basic cardiovascular support during a CRITICAL CARE PERIOD, ranging from 000 to 997 days. BASIC CARDIOVASCULAR SUPPORT DAYS is the same as attribute ACTIVITY DURATION.

BASIC CARDIOVASCULAR SUPPORT DAYS is the total number of days that the PATIENT received basic cardiovascular support during a CRITICAL CARE PERIOD, ranging from 0 to 997 days.

BASIC CARDIOVASCULAR SUPPORT DAYS is derived from the difference between the ACTIVITY PROPERTY EFFECTIVE DATE and the ACTIVITY PROPERTY END DATE for all ACTIVITY PROPERTIES where the ORGAN SYSTEM SUPPORTED is National Code 'Basic Cardiovascular Support' within the CRITICAL CARE PERIOD.

BASIC CARDIOVASCULAR SUPPORT DAYS is used by the Secondary Uses Service to derive the Healthcare Resource Group 4. Failure to correctly populate this data element is likely to result in an incorrect Healthcare Resource Group, usually associated with lower levels of healthcare resource.

For further information, please refer to the NHS Digital website at: Payment by Results Guidance.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

BASIC RESPIRATORY SUPPORT DAYS

Change to Data Element: Changed Description

Format/Length: n3
Format/Length: max an3

National Codes:

Default Codes: 998 - 998 or more days of basic respiratory support

999 occurred but day count not known 999 - Occurred but day count not known

Notes:

BASIC RESPIRATORY SUPPORT DAYS is the total number of days that the PATIENT received basic respiratory support during a CRITICAL CARE PERIOD, ranging from 000 to 997 days. BASIC RESPIRATORY SUPPORT DAYS is the same as attribute ACTIVITY DURATION.

BASIC RESPIRATORY SUPPORT DAYS is the total number of days that the PATIENT received basic respiratory support during a CRITICAL CARE PERIOD, ranging from 0 to 997 days.

BASIC RESPIRATORY SUPPORT DAYS is derived from the difference between the <u>ACTIVITY PROPERTY EFFECTIVE DATE</u> and the <u>ACTIVITY PROPERTY END DATE</u> for all <u>ACTIVITY PROPERTIES</u> where the <u>ORGAN SYSTEM SUPPORTED</u> is National Code 'Basic Respiratory Support' within the <u>CRITICAL CARE PERIOD</u>.

BASIC RESPIRATORY SUPPORT DAYS is used by the Secondary Uses Service to derive the Healthcare Resource Group 4. Failure to correctly populate this data element is likely to result in an incorrect Healthcare Resource Group, usually associated with lower levels of healthcare resource.

For further information, please refer to the NHS Digital website at: Payment by Results Guidance.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

BIRTH WEIGHT

Change to Data Element: Changed Description

Format/Length: n4
Format/Length: max an4

National Codes:

Default Codes: 9999 - Weight not known

Notes

<u>BIRTH WEIGHT</u> is the <u>Birth Weight</u>, where the <u>UNIT OF MEASUREMENT</u> is 'Grams (g)'. <u>BIRTH WEIGHT</u> is the same as attribute <u>CLINICAL INVESTIGATION RESULT VALUE</u>.

BIRTH WEIGHT is the result of the Clinical Investigation which measures the Birth Weight, where the UNIT OF MEASUREMENT is 'Grams (g)'.

The range is 0001 to 9998. The range is 1 to 9998.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

CDS INTERCHANGE APPLICATION REFERENCE

Change to Data Element: Changed Description

Format/Length: an14

Format/Length: min an1 max an14

National Codes: Default Codes:

Notes:

CDS INTERCHANGE APPLICATION REFERENCE is the same as attribute CDS INTERCHANGE APPLICATION REFERENCE.

Usage:

This facility enables submitted interchanges to be marked to enable interchange content to be identified and recorded. All Commissioning Data Set Interchanges must contain this data element.

CDS XML Schema Interchanges:

Commissioning Data Set XML Schema interchanges submitted may contain the optional CDS INTERCHANGE APPLICATION REFERENCE.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

CDS INTERCHANGE CONTROL COUNT

Change to Data Element: Changed Description

Format/Length: n7
Format/Length: max n7
National Codes:
Default Codes:

Notes:

CDS INTERCHANGE CONTROL COUNT is the same as attribute CDS INTERCHANGE CONTROL COUNT.

Usage:

Senders of Commissioning Data Set Interchanges must generate this data. Recipients of Commissioning Data Set Interchanges are advised to recount the received Commissioning Data Set messages and match this control count to ensure all Commissioning Data Set data submitted has been correctly received.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

CDS INTERCHANGE CONTROL REFERENCE

Change to Data Element: Changed Description

Format/Length: an14
Format/Length: max n7
National Codes:
Default Codes:

Notes:

CDS INTERCHANGE CONTROL REFERENCE is the same as attribute CDS INTERCHANGE CONTROL REFERENCE.

For each Interchange submitted, the <u>CDS INTERCHANGE CONTROL REFERENCE</u> must be incremented by 1. The maximum value supported is n7 and wrap around from 9999999 to 1 must be supported.

Usage:

CDS INTERCHANGE CONTROL REFERENCE is a mandatory data element when submitting Commissioning Data Set Interchanges and is used to uniquely identify and if required, to sequence check Commissioning Data Set submissions.

Although (for historical reasons) contained in a 14 alpha-numeric format, a maximum value of 9999999 is permitted in the format of n7. For Commissioning Data Sets 6-2, 6-2-1, 6-2-2 and 6-2-3, the XML schemas allow a maximum of an14 alphanumeric characters. This Format/Length was defined historically, but the Secondary Uses Service has always allowed a maximum of 7 numeric characters with a maximum value of 99999999. In Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements" this anomaly has been corrected. Future XML schemas will be amended to carry the correct format/length of max n7.

 $\textit{This control reference data may also be presented on } \underline{\textit{Secondary Uses Service}} \, (\underline{\textit{SUS}}) \, \textit{service messages and audit logs, etc. } \\$

CDS XML Schema Interchanges:

All CDS XML Schema interchanges submitted must contain a CDS INTERCHANGE CONTROL REFERENCE

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

CDS INTERCHANGE RECEIVER IDENTITY

Change to Data Element: Changed Description

Format/Length:

Format/Length:

min an1 max an15

National Codes:

Default Codes:

Notes:

CDS INTERCHANGE RECEIVER IDENTITY is the same as attribute CDS INTERCHANGE RECEIVER IDENTITY.

Usage:

The collection facility for Commissioning data is the <u>Secondary Uses Service</u>.

CDS XML Schema Interchanges:

All <u>Commissioning Data Set</u> XML Schema interchanges submitted must contain the <u>CDS INTERCHANGE RECEIVER IDENTITY</u> of the <u>Secondary Uses Service</u>. Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

CDS INTERCHANGE SENDER IDENTITY

Change to Data Element: Changed Description

Format/Length: an15

Format/Length: min an1 max an15

National Codes: Default Codes:

Notes:

CDS INTERCHANGE SENDER IDENTITY is the same as attribute CDS INTERCHANGE SENDER IDENTITY.

Usage:

CDS INTERCHANGE SENDER IDENTITY is a mandatory data element when submitting Commissioning Data Set interchanges. Every ORGANISATION must register its CDS INTERCHANGE SENDER IDENTITY for use with the Secondary Uses Service.

Where an <u>ORGANISATION</u> acts on behalf of another NHS <u>ORGANISATION</u>, care must be taken to ensure the correct use of the identity. For data submitted to the service, the <u>CDS INTERCHANGE SENDER IDENTITY</u> is the Electronic Data Interchange (EDI) address of the sending site.

CDS XML Schema Interchanges:

All Commissioning Data Set XML Schema interchanges submitted must contain a CDS INTERCHANGE SENDER IDENTITY.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

CDS MESSAGE REFERENCE

Change to Data Element: Changed Description

Format/Length: an14
Format/Length: max n7
National Codes:

Default Codes:

Notes:

 $\underline{\text{CDS MESSAGE REFERENCE}} \text{ is the same as attribute } \underline{\text{CDS MESSAGE REFERENCE}}.$

Usage:

For each message within an interchange the <u>CDS MESSAGE REFERENCE</u> is assigned to provide a unique identity (within an interchange). Although the data is configured in a 14 alpha-numeric format, a maximum value of 9999999 is permitted in the format of n7. Wrap around from 9999999 to 1 must be supported. Each message within an interchange the CDS MESSAGE REFERENCE is assigned to provide a unique identity (within an interchange).

For <u>Commissioning Data Sets</u> 6-2, 6-2-1, 6-2-2 and 6-2-3, the XML schemas allow a maximum of an14 alphanumeric characters. This Format/Length was defined historically, but the <u>Secondary Uses Service</u> has always allowed a maximum of 7 numeric characters with a maximum value of 99999999. In <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u> this anomaly has been corrected. Future XML schemas will be amended to carry the correct format/length of max n7.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

CDS RECORD IDENTIFIER

Change to Data Element: Changed Description

Format/Length: an35

Format/Length: min an1 max an35

National Codes: Default Codes:

Notes:

CDS RECORD IDENTIFIER is the same as attribute RECORD IDENTIFIER.

CDS RECORD IDENTIFIER may also be referred to as the CDS-RID.

When exchanging Commissioning Data Set data, <u>CDS RECORD IDENTIFIER</u> is an optional data element and when used is a unique number generated by the sender and inserted into the Commissioning Data Set data to enable senders and recipients to be able to cross-match and uniquely identify each and every Commissioning Data Set record.

The CDS RECORD IDENTIFIER consists of the following components:

REF	RID COMPONENT	FORMAT	CODES / VALUES
1 1	CDS SENDER IDENTITY/ORGANISATION IDENTIFIER (CDS SENDER)	an5	As generated in the CDS V6-2 Type 005B - CDS Transaction Header Group - Bulk Update Protocol or the CDS V6-2 Type 005N - CDS Transaction Header Group - Net Change Protocol Or As generated in the CDS V6-2-1 Type 005B - CDS Transaction Header Group - Bulk Update Protocol or the CDS V6-2-1 Type 005N - CDS Transaction Header Group - Net Change Protocol Or As generated in the CDS V6-2-2 Type 005B - CDS Transaction Header Group - Bulk Update Protocol or the CDS V6-2-2 Type 005N - CDS Transaction Header Group - Net Change Protocol Or As generated in the CDS V6-2-3 Type 005B - CDS Transaction Header Group - Bulk Update Protocol or CDS V6-2-3 Type 005N - CDS Transaction Header Group - Bulk Update Protocol or CDS V6-2-3 Type 005N - Commissioning Data Set
2	Not Used	an2	Transaction Header Group - Net Change Protocol Set = Blank
3	CDS INTERCHANGE CONTROL REFERENCE	an14 (n7) *	As generated in the CDS V6-2 Type 001—CDS Interchange Header
4	CDS MESSAGE REFERENCE	an14 (n7) *	As generated in the CDS V6 2 Type 003 CDS Message Header
3	CDS INTERCHANGE CONTROL REFERENCE	max n7	As generated in the CDS V6-2 Type 001 - CDS Interchange Header
4	CDS MESSAGE REFERENCE	max n7	As generated in the CDS V6-2 Type 003 - CDS Message Header

^{*} This data item is configured as an14 format element, but a maximum value of 9999999 is permitted in the format of n7.

Usage:

The <u>CDS-RID</u> is an optional reference assigned to each record by the Commissioning Data Set sender to aid the identification and cross-referencing of data between the sender and the receiver(s) of the Commissioning Data Set data.

CDS XML Schema Interchanges:

The <u>CDS-RID</u> data element is carried in the CDS Message Header (<u>CDS V6-2 Type 003 - CDS Message Header</u>). Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

CDS UNIQUE IDENTIFIER

Change to Data Element: Changed Description

Format/Length:	an35
Format/Length:	min an1 max an35
National Codes:	
Default Codes:	

Notes:

CDS UNIQUE IDENTIFIER is the same as attribute RECORD IDENTIFIER.

CDS UNIQUE IDENTIFIER provides a unique identity for the life-time of an episode carried in a Commissioning Data Set message.

Note that the <u>CDS UNIQUE IDENTIFIER</u> must be constructed without the use of <u>PATIENT</u> Confidential Information. This includes <u>PATIENT</u> Identifiers such as <u>NHS NUMBER</u> or <u>LOCAL PATIENT IDENTIFIER</u>, as well as any text which may identify the <u>PATIENT DIAGNOSIS</u> of the <u>PATIENT</u> or any <u>PATIENT</u> procedures being undertaken.

See the Commissioning Data Set Submission Protocol for detailed information.

Once assigned, a Commissioning Data Set record must retain its CDS UNIQUE IDENTIFIER otherwise duplicate Commissioning Data Set records may be generated and stored in the Secondary Uses Service database.

The CDS UNIQUE IDENTIFIER has three components. The recommended constructs are given below.

For All CDS Types EXCEPT the EAL CDS Types:

REF	UID	FORMAT	CODES / VALUES	COMMENT
1	NHS Organisation Code Type	an1	A = Pre 1996 ORGANISATION CODE	Mandatory For all CDS Types
			B = Post 1996 NHS ORGANISATION CODE /	
			ORGANISATION IDENTIFIER	
2	Provider Code	an5	The NHS ORGANISATION CODE /	Mandatory for all <u>CDS Types</u>
			ORGANISATION IDENTIFIER of the Provider at	
			the time of, or at the start of, the period covered	
			by the activity reported by the CDS Message.	
За		an29		

	Application Specific CDS	A code of up to 29 alpha-numeric characters Mandatory for all <u>CDS Types</u>	Ī
	Identity	generated by the Sender's application to Except for EAL CDS Types	ı
ı		uniquely identify the CDS within its CDS Type or	ı
		family of CDS Types	1

For EAL End Of Period (EOP) CDS Types only:

REF	UID	FORMAT	CODES / VALUES	COMMENT
1	NHS Organisation Code Type	an1	A = Pre 1996 ORGANISATION CODE	Mandatory For all <u>CDS Types</u>
			B = Post 1996 NHS ORGANISATION CODE /	
			ORGANISATION IDENTIFIER	
2	Provider Code	an5	The NHS ORGANISATION CODE /	Mandatory for all CDS Types
			ORGANISATION IDENTIFIER of the Provider at	
			the time of, or at the start of, the period covered	
			by the activity reported by the CDS Message.	
3b	Application Specific CDS	an9	A code of up to 9 alpha-numeric characters	Mandatory for all EAL EOP CDS Types
ı	Identity		generated by the Sender's application to	
			uniquely identify the EAL End Of period census	
			CDS Types with the same Admission List Entry.	
			Additional data positions must be left blank.	
3с	Filler	an20	Additional data positions must be left blank.	

For EAL Event During Period (EDP) CDS Types only:

REF	UID	FORMAT	CODES / VALUES	COMMENT
1	NHS Organisation Code Type	an1	A = Pre 1996 <u>ORGANISATION CODE</u> B = Post 1996 NHS <u>ORGANISATION CODE</u> / <u>ORGANISATION IDENTIFIER</u>	Mandatory For all <u>CDS Types</u>
2	Provider Code	an5	The NHS <u>ORGANISATION CODE</u> / <u>ORGANISATION IDENTIFIER</u> of the Provider at the time of, or at the start of, the period covered by the activity reported by the CDS Message.	Mandatory for all <u>CDS Types</u>
	Application Specific CDS Identity	an9	A code of up to 5 alpha-numeric characters padded with 4 trailing spaces to 9 characters. Generated by the Sender's application to uniquely identify the EAL Event During Period Census CDS Types with the same Admission List Entry.	Mandatory for all EAL EDP CDS Types
3e	Filler	an3	A code of 3 alpha-numeric characters generated by the Sender's application to identify the event within the EAL Entry. Even if the events are of different types, they must have different identifiers.	Mandatory for all EAL EDP CDS Types
3f	Filler	an17	Additional data positions must be left blank.	

Usage

CDS UNIQUE IDENTIFIER is a mandatory data item when the Net Change Update Mechanism is used and strongly recommended for use with the Bulk Replacement Update Mechanism.

However 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 in the Secondary Uses Service database.

- Note that senders of Commissioning Data Set data remain directly responsible for the integrity of the CDS UNIQUE IDENTIFIER
- It is a mandatory requirement for all submissions using the Net Change Update Mechanism that these two components are constructed correctly to ensure uniqueness of CDS UNIQUE IDENTIFIERS across the NHS.
- The structure of 3b and 3c allows the EAL End of Period Census and the EAL Event During Period Census for the same EAL Entry to be linked.

There are circumstances in patient care application systems where the control of the UID key integrity may be suspect. These issues include:

- a) Episode deletion (not resulting in a Commissioning Data Set deletion of previously submitted data sent to the original Commissioner);
- b) Episode re-sequencing (not resulting in a corresponding Commissioning Data Set records being sent);
- c) Service agreement alterations not resulting in correct adjustments Old Service Agreement deletion / New Service Agreement addition
- d) Re-admissions causing duplicate keys on the Secondary Uses Service database.

Each use of an NHS <u>ORGANISATION CODE</u> within a Commissioning Data Set message must be associated with the release version of the NHS Organisation Code scheme. At present this may be derived locally by NHS IT systems.

The following values have been informally used in many Commissioning Data Set implementations and are recommended to be used:

A or O* Signifying "OLD" (pre-April 1996) to denote an <u>ORGANISATION CODE</u> issued before, and in use up to the 1996 major re-issue B or N* Signifying "NEW" (post-April 1996) to denote an <u>ORGANISATION CODE</u> / <u>ORGANISATION IDENTIFIER</u> issued from April 1996

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

^{*} The values of **A and B** must be used in the formatting of the CDS UNIQUE IDENTIFIER.

COMMISSIONER REFERENCE NUMBER

Change to Data Element: Changed Description

Format/Length: an17
Format/Length: max an17

National Codes:

Default Codes:

8 (left justified padded with spaces) Not applicable
9 (left justified padded with spaces) Not known

Default Codes: 8 - Not applicable

9 - COMMISSIONER REFERENCE NUMBER not known

Notes:

COMMISSIONER REFERENCE NUMBER is the same as attribute COMMISSIONER REFERENCE NUMBER. Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

COMMISSIONING SERIAL NUMBER

Change to Data Element: Changed Description

Format/Length:
an6
Format/Length:
max an6
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 <u>PATIENTS</u> treated under <u>Non-Contract Activities</u>. <u>NHS Trusts</u> and <u>NHS Foundation Trusts</u> are required to insert the letters 'OAT' (mandated input as capitals) in the first three characters of the <u>COMMISSIONING SERIAL NUMBER</u> field of the Admitted Patient Care Commissioning Data Set. The remaining three characters will continue to be defined locally, see <u>DSCN 17/2000</u>.

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 National Tariff Payment System 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.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

CRITICAL CARE LEVEL 2 DAYS

Change to Data Element: Changed Description

Format/Length: n3
Format/Length: max an3

National Codes: Default Codes:

998 - 998 or more level 2 days

999 - level 2 days occurred but day count not known 999 - Level 2 days occurred but day count not known

Notes:

<u>CRITICAL CARE LEVEL 2 DAYS</u> is the total number of days a <u>PATIENT</u> received level 2 care during a <u>CRITICAL CARE PERIOD</u>. From 000 to 997 days can be recorded; if 998 or more days have occurred the default code should be used. <u>CRITICAL CARE LEVEL 2 DAYS</u> is the same as attribute ACTIVITY DURATION.

CRITICAL CARE LEVEL 2 DAYS is derived from the difference between the ACTIVITY PROPERTY EFFECTIVE DATE and the ACTIVITY PROPERTY END DATE for all ACTIVITY PROPERTIES where the CRITICAL CARE LEVEL is National Code 02 'Level 2' within the CRITICAL CARE PERIOD, CRITICAL CARE LEVEL 2 DAYS is the total number of days a PATIENT received level 2 care during a CRITICAL CARE PERIOD, ranging from 0 to 997 days.

CRITICAL CARE LEVEL 2 DAYS is derived from the difference between the <u>ACTIVITY PROPERTY EFFECTIVE DATE</u> and the <u>ACTIVITY PROPERTY END DATE</u> for all <u>ACTIVITY PROPERTIES</u> where the <u>CRITICAL CARE LEVEL</u> is National Code 'Level 2' within the <u>CRITICAL CARE PERIOD</u>.

CRITICAL CARE LEVEL 2 DAYS is used by the Secondary Uses Service to derive the Healthcare Resource Group 4. Failure to correctly populate this data element is likely to result in an incorrect Healthcare Resource Group, usually associated with lower levels of healthcare resource.

For further information, please refer to the NHS Digital website at: Payment by Results Guidance.

Note: the Format/Length has been updated in Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements". The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

CRITICAL CARE LEVEL 3 DAYS

Change to Data Element: Changed Description

Format/Length: n3 Format/Length: max an3

National Codes:

Default Codes: 998 - 998 or more level 3 days

> 999 - level 3 days occurred but day count not known 999 - Level 3 days occurred but day count not known

Notes:

CARE LEVEL 3 DAYS is the total number of days a PATIENT received level 3 care during a CRITICAL CARE PERIOD. From 000 to 997 days can be recorded; if 998 or more days have occurred the default code should be used-CRITICAL CARE LEVEL 3 DAYS is the same as attribute ACTIVITY DURATION.

CRITICAL CARE LEVEL 3 DAYS is derived from the difference between the ACTIVITY PROPERTY EFFECTIVE DATE and the ACTIVITY PROPERTY END DATE for all ACTIVITY PROPERTIES where the CRITICAL CARE LEVEL is National Code 03 'Level 3' within the CRITICAL CARE PERIOD_CRITICAL CARE LEVEL 3 DAYS is the total number of days a PATIENT received level 3 care during a CRITICAL CARE PERIOD, ranging from 0 to 997 days.

CRITICAL CARE LEVEL 3 DAYS is derived from the difference between the ACTIVITY PROPERTY EFFECTIVE DATE and the ACTIVITY PROPERTY END DATE for all ACTIVITY PROPERTIES where the CRITICAL CARE LEVEL is National Code 'Level 3' within the CRITICAL CARE PERIOD.

CRITICAL CARE LEVEL 3 DAYS is used by the Secondary Uses Service to derive the Healthcare Resource Group 4. Failure to correctly populate this data element is likely to result in an incorrect <u>Healthcare Resource Group</u>, usually associated with lower levels of healthcare resource.

For further information, please refer to the NHS Digital website at: Payment by Results Guidance.

Note: the Format/Length has been updated in Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements". The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

CRITICAL CARE LOCAL IDENTIFIER

Change to Data Element: Changed Description

Format/Length: an8 Format/Length: max an8 National Codes:

Default Codes:

Notes:

CRITICAL CARE LOCAL IDENTIFIER is the same as attribute ACTIVITY IDENTIFIER.

CRITICAL CARE LOCAL IDENTIFIER is a unique local ACTIVITY IDENTIFIER used to identify the start of CARE ACTIVITY within a CRITICAL CARE PERIOD.

This locally defined variable should as a minimum include a sequential numerical component that can discriminate two or more CRITICAL CARE PERIODS occurring on the same calendar day for the same patient. CRITICAL CARE LOCAL IDENTIFIER should as a minimum include a sequential numerical component that can discriminate two or more CRITICAL CARE PERIODS occurring on the same calendar day for the same patient.

Note: the Format/Length has been updated in Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements". The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

DERMATOLOGICAL SUPPORT DAYS

Change to Data Element: Changed Description

Format/Length: Format/Length: max an3

National Codes:

Default Codes:

998 - 998 or more days of dermatological support

999 - occurred but day count not known

999 - Occurred but day count not known

Notes:

The total number of days that the PATIENT received dermatological system support during a CRITICAL CARE PERIOD, ranging from 000 to 997 days. DERMATOLOGICAL SUPPORT DAYS is the same as attribute ACTIVITY DURATION.

This is derived from the difference between the ACTIVITY PROPERTY EFFECTIVE DATE and the ACTIVITY PROPERTY END DATE for all ACTIVITY PROPERTY END DATE for a

DERMATOLOGICAL SUPPORT DAYS is derived from the difference between the <u>ACTIVITY PROPERTY EFFECTIVE DATE</u> and the <u>ACTIVITY PROPERTY END DATE</u> for all <u>ACTIVITY PROPERTIES</u> where the <u>ORGAN SYSTEM SUPPORTED</u> is National Code 'Dermatological Support' within the CRITICAL CARE PERIOD.

<u>DERMATOLOGICAL SUPPORT DAYS</u> is used by the <u>Secondary Uses Service</u> to derive the <u>Healthcare Resource Group</u> 4. Failure to correctly populate this data element is likely to result in an incorrect <u>Healthcare Resource Group</u>, usually associated with lower levels of healthcare resource.

For further information, please refer to the NHS Digital website at: Payment by Results Guidance.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

DURATION OF FLECTIVE WAIT

Change to Data Element: Changed Description

Format/Length:

Format/Length:

National Codes:

Default Codes:

9998 - Not applicable
9999 - Not known (i.e. no date known for decision to admit): a validation error
9999 - Not known (no date known for DECISION TO ADMIT)

Notes:

<u>DURATION OF ELECTIVE WAIT</u> is a derived item that records the waiting time from the <u>ORIGINAL DECIDED TO ADMIT DATE</u> to the admission date at the provider where the treatment actually takes place. <u>DURATION OF ELECTIVE WAIT</u> is the same as attribute <u>ACTIVITY DURATION</u>.

Enter 0000 8887 in days, right justified with preceding zeros. DURATION OF ELECTIVE WAIT is a derived item that records the waiting time in days from the ORIGINAL DECIDED TO ADMIT DATE to the admission date at the provider where the treatment actually takes place, ranging from 0 to 8887 days.

A waiting time of 0 (zero) days is only to be entered after careful scrutiny.

Please note that the <u>PATIENT's WAITING PERIOD EXCLUSIONS</u> (their aggregate suspended and/or self-deferred periods) should be subtracted from the <u>DURATION OF ELECTIVE WAIT</u>.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

EPISODE NUMBER

Change to Data Element: Changed Description

Format/Length:

Format/Length:

max an2

National Codes:

Default Codes:

98 - Not applicable

99 - EPISODE NUMBER not known

Notes:

EPISODE NUMBER is the same as attribute ACTIVITY IDENTIFIER.

EPISODE NUMBER is used to uniquely identify episodes, and is a sequence number for each Consultant Episode (Hospital Provider) in a Hospital Provider Spell. The first episode of each new Hospital Provider Spell (including re admitted PATIENTS) commences at 01.

A known <u>EPISODE NUMBER</u> can be between 01 to 87. The first episode of each new <u>Hospital Provider Spell</u> (including re-admitted <u>PATIENTS</u>) commences at 1.

A known EPISODE NUMBER can be between 1 to 87.

For other <u>Health Care Provider</u> episodes, it is a sequence number for a <u>CONSULTANT/PATIENT</u> combination; or it is a sequence number for each <u>Sexual Health and HIV Episode</u>.

EPISODE NUMBER is used by the Secondary Uses Service to derive the Healthcare Resource Group 4. Failure to correctly populate this data element is likely to result in an incorrect Healthcare Resource Group, usually associated with lower levels of healthcare resource.

For further information, please refer to the NHS Digital website at: Payment by Results Guidance.

Note: the Default Code description for 99—Not known has been updated. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct. Notes:

The Default Code description for 99 - Not known has been updated. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

GASTRO-INTESTINAL SUPPORT DAYS

Change to Data Element: Changed Description

Format/Length:	n3	
Format/Length:	max an3	
National Codes:		
Default Codes:	998 - 998 or more days of gastro-intestinal support	
	999 - occurred but day count not known	
	999 - Occurred but day count not known	

Notes:

The total number of days that the <u>PATIENT</u> received gastro-intestinal system support during a <u>CRITICAL CARE PERIOD</u>, ranging from 000 to 997 days. GASTRO-INTESTINAL SUPPORT DAYS is the same as attribute <u>ACTIVITY DURATION</u>.

This is derived from the difference between the <u>ACTIVITY PROPERTY EFFECTIVE DATE</u> and the <u>ACTIVITY PROPERTY END DATE</u> for all <u>ACTIVITY PROPERTY END DATE</u> for all <u>ACTIVITY PROPERTY END DATE</u> for all <u>ACTIVITY PROPERTY END DATE</u> is National Code 07 'Gastrointestinal Support' within the <u>CRITICAL CARE PERIOD</u>.GASTRO-INTESTINAL SUPPORT DAYS is the total number of days that the <u>PATIENT</u> received gastro-intestinal system support during a <u>CRITICAL CARE PERIOD</u>, ranging from 0 to 997 days.

GASTRO-INTESTINAL SUPPORT DAYS is derived from the difference between the ACTIVITY PROPERTY EFFECTIVE DATE and the ACTIVITY PROPERTY END DATE for all ACTIVITY PROPERTIES where the ORGAN SYSTEM SUPPORTED is National Code 'Gastrointestinal Support' within the CRITICAL CARE PERIOD.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

GESTATION LENGTH (ASSESSMENT)

Change to Data Element: Changed Description

 Format/Length:
 n2

 Format/Length:
 an2

 National Codes:
 Default Codes:

 Default Codes:
 99 - Not known

Notes:

GESTATION LENGTH (ASSESSMENT) is the same as attribute GESTATION LENGTH IN WEEKS.

<u>GESTATION LENGTH (ASSESSMENT)</u> records a period of between 10 to 49 weeks in completed weeks that is a clinical assessment of <u>GESTATION LENGTH IN WEEKS</u>.

GESTATION LENGTH (AT DELIVERY)

Change to Data Element: Changed Description

Format/Length:
n2
Format/Length:
an2
National Codes:
Default Codes:
99 - Not known

Notes:

GESTATION LENGTH (AT DELIVERY) is the same as attribute GESTATION LENGTH IN WEEKS and records a period of between 10 to 49 weeks in completed weeks at delivery. Note: the Format/Length has been updated in Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements". The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct

GESTATION LENGTH (LABOUR ONSET)

Change to Data Element: Changed Description

Format/Length:	n2
Format/Length:	an2
National Codes:	
Default Codes:	99 - Not known

Notes:

GESTATION LENGTH (LABOUR ONSET) is the same as attribute GESTATION LENGTH IN WEEKS.

GESTATION LENGTH (LABOUR ONSET) records a period of between 10 to 49 weeks in completed weeks at the onset of labour.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

HOSPITAL PROVIDER SPELL IDENTIFIER

Change to Data Element: New Data Element

This item is being used for development purposes and has not yet been approved.

This data element is also known by these names:

Context	Alias				
plural	HOSPITAL PROVIDER SPELL IDENTIFIERS				

HOSPITAL PROVIDER SPELL IDENTIFIER

Change to Data Element: New Data Element

HOSPITAL PROVIDER SPELL IDENTIFIER

Attribute:

ACTIVITY IDENTIFIER

HOSPITAL PROVIDER SPELL NUMBER

Change to Data Element: Changed Description

Format/Length:	an12
Format/Length:	max an12
National Codes:	
Default Codes:	

Notes:

 $\underline{\text{HOSPITAL PROVIDER SPELL NUMBER}} \text{ is the same as attribute } \underline{\text{ACTIVITY IDENTIFIER}}.$

A HOSPITAL PROVIDER SPELL NUMBER is a unique identifier for each Hospital Provider Spell for a Health Care Provider.

HOSPITAL PROVIDER SPELL NUMBER is used by the Secondary Uses Service to derive the Healthcare Resource Group 4. Failure to correctly populate this data element is likely to result in an incorrect Healthcare Resource Group, usually associated with lower levels of healthcare resource.

For further information, please refer to the NHS Digital website at: Payment by Results Guidance.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

HOSPITAL PROVIDER SPELL NUMBER will be replaced with HOSPITAL PROVIDER SPELL IDENTIFIER, which is the most recent approved national information standard to describe the required definition.

LIVER SUPPORT DAYS

Change to Data Element: Changed Description

Format/Length:

Format/Length:

max an3

National Codes:

Default Codes:

998 - 998 or more days of liver support

999 - occurred but day count not known

999 - Occurred but day count not known

Notes:

<u>LIVER SUPPORT DAYS</u> is the total number of days that the <u>PATIENT</u> received liver support during a <u>CRITICAL CARE PERIOD</u>, ranging from 000 to 997 days.<u>LIVER SUPPORT DAYS</u> is the same as attribute <u>ACTIVITY DURATION</u>.

LIVER SUPPORT DAYS is the total number of days that the PATIENT received liver support during a CRITICAL CARE PERIOD, ranging from 0 to 997 days.

<u>LIVER SUPPORT DAYS</u> is derived from the difference between the <u>ACTIVITY PROPERTY EFFECTIVE DATE</u> and the <u>ACTIVITY PROPERTY END DATE</u> for all <u>ACTIVITY PROPERTIES</u> where the <u>ORGAN SYSTEM SUPPORTED</u> is National Code '*Liver Support*' within the <u>CRITICAL CARE PERIOD</u>.

<u>LIVER SUPPORT DAYS</u> is used by the <u>Secondary Uses Service</u> to derive the <u>Healthcare Resource Group</u> 4. Failure to correctly populate this data element is likely to result in an incorrect <u>Healthcare Resource Group</u>, usually associated with lower levels of healthcare resource.

For further information, please refer to the NHS Digital website at: Payment by Results Guidance.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

NEUROLOGICAL SUPPORT DAYS

Change to Data Element: Changed Description

Format/Length:

Format/Length:

max an3

National Codes:

Default Codes:

998 - 998 or more days of neurological support
999 - occurred but day count not known

Notes:

NEUROLOGICAL SUPPORT DAYS is the total number of days that the PATIENT received neurological system support during a CRITICAL CARE PERIOD, ranging from 000 to 999 days. NEUROLOGICAL SUPPORT DAYS is the same as attribute ACTIVITY DURATION.

999 - Occurred but day count not known

NEUROLOGICAL SUPPORT DAYS is total number of days that the PATIENT received neurological system support during a CRITICAL CARE PERIOD, ranging from 0 to 997 days.

NEUROLOGICAL SUPPORT DAYS is derived from the difference between the ACTIVITY PROPERTY EFFECTIVE DATE and the ACTIVITY PROPERTY END DATE for all ACTIVITY PROPERTIES where the ORGAN SYSTEM SUPPORTED is National Code 'Neurological Support' within the CRITICAL CARE PERIOD.

NEUROLOGICAL SUPPORT DAYS is used by the Secondary Uses Service to derive the Healthcare Resource Group 4. Failure to correctly populate this data element is likely to result in an incorrect Healthcare Resource Group, usually associated with lower levels of healthcare resource.

For further information, please refer to the NHS Digital website at: Payment by Results Guidance.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

NHS SERVICE AGREEMENT LINE NUMBER

Change to Data Element: Changed Description

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

Notes:

NHS SERVICE AGREEMENT LINE NUMBER is the same as attribute NHS SERVICE AGREEMENT LINE NUMBER.

The NHS SERVICE AGREEMENT LINE NUMBERS may be used to identify a specific NHS SERVICE AGREEMENT reference where the main identifier refers to a general omnibus agreement. NHS SERVICE AGREEMENT LINE NUMBER may be used to identify a specific NHS SERVICE AGREEMENT reference where the main identifier refers to a general omnibus agreement.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

ORGAN SUPPORT MAXIMUM

Change to Data Element: Changed Description, linked Attribute

Format/Length: n2
Format/Length: an2
National Codes:
Default Codes:

Notes:

The maximum number of ORGAN SYSTEMS SUPPORTED on any one day during a <u>CRITICAL CARE PERIOD</u>. Each organ system can only be counted once on any calendar day. Both basic and advanced categories cannot be counted at the same time. The number of organ systems supported can be between 00 to 07, although for the purposes of recording on the Commissioning Data Set messages Gastro intestinal support days are not recorded so the maximum is effectively 06-ORGAN SUPPORT MAXIMUM is the same as attribute ORGAN SUPPORT MAXIMUM.

This is derived by counting the maximum number of <u>ACTIVITY PROPERTIES</u> where the <u>ORGAN SYSTEM SUPPORTED</u> is different, for each day of the <u>CRITICAL CARE PERIOD</u> and reporting the highest number. Each <u>ACTIVITY PROPERTY</u> will have one or more <u>ACTIVITY PROPERTY EFFECTIVE DATES</u> and <u>ACTIVITY PROPERTY END DATES</u> within the <u>CRITICAL CARE PERIOD</u>. Both basic and advanced categories cannot be counted at the same time therefore the maximum number of systems supported is 7. Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808</u> "Correction of Format/Length Data Elements". The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

ORGAN SUPPORT MAXIMUM

Change to Data Element: Changed Description, linked Attribute

ORGAN SUPPORT MAXIMUM

Attribute:

CLINICAL INVESTIGATION RESULT VALUE

ORGAN SUPPORT MAXIMUM

OUTPATIENT ATTENDANCE IDENTIFIER

Change to Data Element: New Data Element

This item is being used for development purposes and has not yet been approved.

This data element is also known by these names:

Context	Alias
plural	OUTPATIENT ATTENDANCE IDENTIFIERS

OUTPATIENT ATTENDANCE IDENTIFIER

Change to Data Element: New Data Element

OUTPATIENT ATTENDANCE IDENTIFIER

Attribute:

ACTIVITY IDENTIFIER

PROVIDER REFERENCE NUMBER

Change to Data Element: Changed Description

Format/Length: an17
Format/Length: max an17

National Codes: Default Codes:

Notes:

PROVIDER REFERENCE NUMBER is the same as attribute PROVIDER REFERENCE NUMBER. PROVIDER REFERENCE NUMBER is the same as

attribute PROVIDER REFERENCE NUMBER Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

RENAL SUPPORT DAYS

Change to Data Element: Changed Description

Format/Length:
Format/Length:

National Codes:

Default Codes:

000 997 days
998 - 998 or more days of renal support
999 - occurred but day count not known

Default Codes:
998 - 998 or more days of renal support
999 - Occurred but day count not known

Notes:

RENAL SUPPORT DAYS is the total number of days that the PATIENT received renal system support during a <u>CRITICAL CARE PERIOD</u>. RENAL SUPPORT DAYS is the same as attribute <u>ACTIVITY DURATION</u>.

This is derived from the difference between the <u>ACTIVITY PROPERTY EFFECTIVE DATE</u> and the <u>ACTIVITY PROPERTY END DATE</u> for all <u>ACTIVITY PROPERTY END DATE</u> for all <u>ACTIVITY PROPERTY END DATE</u> is National Code 05 'Renal Support' within the <u>CRITICAL CARE PERIOD</u>. RENAL SUPPORT DAYS is the total number of days that the <u>PATIENT</u> received renal system support during a <u>CRITICAL CARE PERIOD</u>, ranging from 0 to 997 days.

RENAL SUPPORT DAYS is derived from the difference between the <u>ACTIVITY PROPERTY EFFECTIVE DATE</u> and the <u>ACTIVITY PROPERTY END DATE</u> for all <u>ACTIVITY PROPERTIES</u> where the <u>ORGAN SYSTEM SUPPORTED</u> is National Code 'Renal Support' within the <u>CRITICAL CARE PERIOD</u>.

RENAL SUPPORT DAYS is used by the Secondary Uses Service to derive the Healthcare Resource Group 4. Failure to correctly populate this data element is likely to result in an incorrect Healthcare Resource Group, usually associated with lower levels of healthcare resource.

For further information, please refer to the NHS Digital website at: Payment by Results Guidance.

Note: the Format/Length has been updated in <u>Data Dictionary Change Notice 1808 "Correction of Format/Length Data Elements"</u>. The Data Set specifications that contain this item will be updated in the next version of the Information Standard where it is not already correct.

COMMISSIONING DATA SET VERSION 6-2-1 XML SCHEMA CONSTRAINTS

Change to XML Schema Constraint: Changed Description

XML Schema constraints applied to the:

- CDS V6-2-1 Type 011 Emergency Care Commissioning Data Set
- CDS V6-2-1 Type 001 Commissioning Data Set Interchange Header
- CDS V6-2-1 Type 002 Commissioning Data Set Interchange Trailer
- CDS V6-2-1 Type 003 Commissioning Data Set Message Header
- CDS V6-2-1 Type 004 Commissioning Data Set Message Trailer
- CDS V6-2-1 Type 005B Commissioning Data Set Transaction Header Group Bulk Update Protocol
- CDS V6-2-1 Type 005N Commissioning Data Set Transaction Header Group Net Change Protocol

- None = The National Codes and Default Codes are included in the XML Schema
- Removed = The National Codes and Default Codes are not included in the XML Schema.

Data Element	XML Schema Format/Length	Allowed Values	Range	Pattern Match	Reason / Comment / XML Choice
ACTIVITY TREATMENT FUNCTION CODE (DECISION TO ADMIT)	None	Removed	None	None	National Codes not enumerated in the XML Schema
AGE AT CDS ACTIVITY DATE	max n3	None	None	None	Existing Format/Length states n3 - XML Schema allows max n3
CDS COPY RECIPIENT IDENTITY	min an3 max an12	Removed	Existing Format/Length states max an3 - XML Schema allows max n3		
CDS COPY RECIPIENT IDENTITY	min an3 max an12	Removed	None	None	Field size extended to future proof for ODS ORGANISATION CODE changes

CDS INTERCHANGE APPLICATION REFERENCE	min an1 max an14	None	Field size extended to future proof for ODS ORGANISATION		
REFERENCE			CODE changes		
CDS INTERCHANGE TEST INDICATOR	None	0,1	None	None	Existing Format/Length states an14 - XML Schema allows min an1 max an14
CDS INTERCHANGE CONTROL COUNT	max n7	None	Null value not allowed in XML Schema		
CDS MESSAGE VERSION NUMBER	an6	CDS062	None	None	Existing Format/Length states n7 - XML Schema allows max n7
CDS INTERCHANGE	min an1 max an14	None	None	None	Existing Format/Length states an14 - XML Schema allows min an1 max an14
REFERENCE CDS INTERCHANGE	min an1 max an15	None	None	None	Existing Format/Length states an15-
SENDER IDENTITY CDS INTERCHANGE	min an1 max an15	None	None	None	XML Schema allows min an1 max an15 Existing Format/Length states an15-
CDS INTERCHANGE	None	0,1	None	None	XML Schema allows min an1 max an15 Null value not allowed in XML Schema
TEST INDICATOR CDS MESSAGE	max n7	None	None	None	Existing Format/Length states an14 -
REFERENCE		00000			XML Schema allows max n7 to support SUS requirements
CDS MESSAGE VERSION NUMBER	an6	CDS062	None	None	Message version is hard coded in the XML Schema
CDS PRIME RECIPIENT IDENTITY	min an3 max an12	Removed	None	None	Field size extended to future proof for ODS ORGANISATION CODE changes
CDS RECORD IDENTIFIER	min an1 max an35	None	Field size extended to future proof for ODS ORGANISATION CODE changes		
CDS SENDER IDENTITY	min an3 max an12	None	None	None	Existing Format/Length states an35 - XML Schema allows min an1 max an35
CDS SENDER IDENTITY	min an3 max an12	None	Field size extended to future proof for ODS ORGANISATION CODE changes		
CODED CLINICAL ENTRY SEQUENCE NUMBER	max n5	None	None	None	Field size extended to future proof for ODS ORGANISATION CODE changes
<u>CDS UNIQUE</u> <u>IDENTIFIER</u>	min an1 max an35	None	Existing Format/Length states min n1 max n5 - XML Schema allows max n5		
EMERGENCY CARE ATTENDANCE IDENTIFIER	max an12	None	None	None	Existing Format/Length states an35- XML Schema allows min an1 max an35
CODED CLINICAL ENTRY SEQUENCE NUMBER	max n5	None	None	None	Existing Format/Length states min n1 max n5 - XML Schema allows max n5
COMMISSIONER REFERENCE NUMBER	max an17	None	None	None	Existing Format/Length states an17 - XML Schema allows max an17
COMMISSIONING SERIAL NUMBER	max an6	None	None	None	Existing Format/Length states an6 - XML Schema allows max an6
EMERGENCY CARE ATTENDANCE IDENTIFIER	max an12	None	None	None	Existing Format/Length states min an1 max an12 - XML Schema allows max an12
EMERGENCY CARE DEPARTMENT TYPE	None	Removed	None	None	National Codes not enumerated in the XML Schema
EMERGENCY CARE PLACE OF INJURY (LATITUDE)	None	None	-90.000000- 90.000000	None	Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LATITUDE)
EMERGENCY CARE PLACE OF INJURY (LONGITUDE)	None	None	-180.000000- 180.000000	None	Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LONGITUDE)
ETHNIC CATEGORY	max an2	None	None	None	Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in other data sets. Second character can be for local use. Format/Length amended to max an2
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	None	Removed	None	None	Default codes not enumerated in the XML Schema

GENERAL MEDICAL PRACTITIONER (SPECIFIED)	None	Removed	None	None	National Codes and default codes not enumerated in the XML Schema
NHS SERVICE AGREEMENT LINE NUMBER	max an10	None	National Codes and default codes not enumerated in the XML Schema		
ORGANISATION IDENTIFIER (CODE OF COMMISSIONER)	None	Removed	None	None	Existing Format/Length states an10 - XML Schema allows max an10
ORGANISATION IDENTIFIER (CODE OF COMMISSIONER)	None	Removed	None	None	Default codes not enumerated in the XML Schema
ORGANISATION IDENTIFIER (CODE OF PROVIDER)	min an3 max an5	Removed	None	None	Default codes not enumerated in the XML Schema
ORGANISATION IDENTIFIER (RESIDENCE RESPONSIBILITY)	None	Removed	None	None	Default codes not enumerated in the XML Schema
ORGANISATION SITE IDENTIFIER (DISCHARGE FROM EMERGENCY CARE)	None	Removed	None	None	Default codes not enumerated in the XML Schema
ORGANISATION SITE IDENTIFIER (EMERGENCY CARE ATTENDANCE SOURCE)	None	Removed	None	None	Default codes not enumerated in the XML Schema
ORGANISATION SITE IDENTIFIER (OF TREATMENT)	None	Removed	None	None	Default codes not enumerated in the XML Schema
PROVIDER REFERENCE NUMBER	max an17	None	Default codes not enumerated in the XML Schema		
WAITING TIME MEASUREMENT TYPE	None	01,02,09	None	None	Existing Format/Length states an17 - XML Schema allows max an17
WAITING TIME MEASUREMENT TYPE	None	01,02,09	None	None	National Codes 03 and 04 not valid in Commissioning Data Sets

COMMISSIONING DATA SET VERSION 6-2-2 XML SCHEMA CONSTRAINTS

Change to XML Schema Constraint: Changed Description

XML Schema constraints applied to the:

- CDS V6-2-2 Type 011 Emergency Care CDS
 CDS V6-2-2 Type 001 CDS Interchange Header
- CDS V6-2-2 Type 002 CDS Interchange Trailer
- CDS V6-2-2 Type 003 CDS Message Header
- CDS V6-2-2 Type 004 CDS Message Trailer
- CDS V6-2-2 Type 005B CDS Transaction Header Group Bulk Update Protocol
- CDS V6-2-2 Type 005N CDS Transaction Header Group Net Change Protocol

- None = The National Codes and Default Codes are included in the XML Schema
- Removed = The National Codes and Default Codes are not included in the XML Schema.

Data Element	XML Schema Format/Length	Allowed Values	Range	Pattern Match	Reason / Comment / XML Choice
ACTIVITY TREATMENT FUNCTION CODE (DECISION TO ADMIT)	None	Removed	None	None	National Codes not enumerated in the XML Schema
AGE AT CDS ACTIVITY DATE	max n3	None	None	None	Existing Format/Length states n3 XML Schema allows max n3
CDS COPY RECIPIENT IDENTITY	min an3 max an12		Existing Format/Length states max an3 - XML Schema allows max n3		
CDS COPY RECIPIENT IDENTITY	min an3 max an12	Removed	None	None	Field size extended to future proof for ODS ORGANISATION CODE changes

CDS INTERCHANGE APPLICATION REFERENCE	min an1 max an14	None	Field size extended to future proof for ODS ORGANISATION CODE changes		
CDS INTERCHANGE TEST INDICATOR	None	0,1	None	None	Existing Format/Length states an14 - XML Schema allows min an1 max an14
CDS INTERCHANGE	max n7	None	Null value not allowed in XML Schema		AWE JOHETHA ANOWS THIN ANT THAX ATT T
CDS MESSAGE	an6	CDS062	None None	None	Existing Format/Length states n7 - XML
VERSION NUMBER CDS INTERCHANGE	min an1 max an14	None	None	None	Schema allows max n7 Existing Format/Length states an14 -
CONTROL REFERENCE					XML Schema allows min an1 max an14
CDS INTERCHANGE SENDER IDENTITY	min an1 max an15	None	None	None	Existing Format/Length states an15 - XML Schema allows min an1 max an15
CDS INTERCHANGE RECEIVER IDENTITY	min an1 max an15	None	None	None	Existing Format/Length states an15 - XML Schema allows min an1 max an15
CDS INTERCHANGE TEST INDICATOR	None	0,1	None	None	Null value not allowed in XML Schema
CDS MESSAGE REFERENCE	max n7	None	None	None	Existing Format/Length states an14 - XML Schema allows max n7 to support SUS requirements
CDS MESSAGE VERSION NUMBER	an6	CDS062	None	None	Message version is hard coded in the XML Schema
CDS PRIME RECIPIENT IDENTITY	min an3 max an12	Removed	None	None	Field size extended to future proof for ODS ORGANISATION CODE changes
CDS RECORD IDENTIFIER	min an1 max an35	None	Field size extended to future proof for ODS ORGANISATION CODE changes		<u>obe enternement</u> unangee
CDS SENDER IDENTITY	min an3 max an12	None	None	None	Existing Format/Length states an35 - XML Schema allows min an1 max an35
CDS SENDER IDENTITY	min an3 max an12	None	Field size extended to future proof for ODS ORGANISATION CODE changes		
EMERGENCY CARE	None	None	None	None	Field size extended to future proof for
PLACE OF INJURY (LATITUDE)	1,0,10	None			ODS ORGANISATION CODE changes
PLACE OF INJURY	min an1 max an35	None	None	None	
PLACE OF INJURY (LATITUDE) CDS UNIQUE					ODS ORGANISATION CODE changes Existing Format/Length states an35 -
PLACE OF INJURY (LATITUDE) CDS UNIQUE IDENTIFIER COMMISSIONER REFERENCE	min an1 max an35	None	None	None	ODS ORGANISATION CODE changes Existing Format/Length states an35 - XML Schema allows min an1 max an35 Existing Format/Length states an17 -
PLACE OF INJURY (LATITUDE) CDS UNIQUE IDENTIFIER COMMISSIONER REFERENCE NUMBER COMMISSIONING	min an1 max an35	None None	None None	None None	ODS ORGANISATION CODE changes Existing Format/Length states an35 - XML Schema allows min an1 max an35 Existing Format/Length states an17 - XML Schema allows max an17 Existing Format/Length states an6 - XML
PLACE OF INJURY (LATITUDE) CDS UNIQUE IDENTIFIER COMMISSIONER REFERENCE NUMBER COMMISSIONING SERIAL NUMBER EMERGENCY CARE PLACE OF INJURY	min an1 max an35 max an17 max an6	None None None	None None None -90.000000-	None None None	Existing Format/Length states an35 - XML Schema allows min an1 max an35 Existing Format/Length states an17 - XML Schema allows max an17 XML Schema allows max an17 Existing Format/Length states an6 - XML Schema allows max an6 Range applied to allow correct reporting of EMERGENCY CARE PLACE OF
PLACE OF INJURY (LATITUDE) CDS UNIQUE IDENTIFIER COMMISSIONER REFERENCE NUMBER COMMISSIONING SERIAL NUMBER EMERGENCY CARE PLACE OF INJURY (LATITUDE) EMERGENCY CARE PLACE OF INJURY	min an1 max an35 max an17 max an6 None	None None None	None None None -90.000000- 90.000000 -180.000000-	None None None	Existing Format/Length states an35— XML Schema allows min an1 max an35 Existing Format/Length states an17— XML Schema allows max an17 XML Schema allows max an17 Existing Format/Length states an6—XML Schema allows max an6 Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LATITUDE) Range applied to allow correct reporting of EMERGENCY CARE PLACE OF
PLACE OF INJURY (LATITUDE) CDS UNIQUE IDENTIFIER COMMISSIONER REFERENCE NUMBER COMMISSIONING SERIAL NUMBER EMERGENCY CARE PLACE OF INJURY (LATITUDE) EMERGENCY CARE PLACE OF INJURY (LONGITUDE)	min an1 max an35 max an17 max an6 None None	None None None None	None None None -90.000000- 90.000000 -180.000000- 180.000000	None None None	Existing Format/Length states an35 - XML Schema allows min an1 max an35 Existing Format/Length states an17 - XML Schema allows max an17 Existing Format/Length states an6 - XML Schema allows max an6 Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LATITUDE) Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LONGITUDE) Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in other data sets. Second character can be for local use.
PLACE OF INJURY (LATITUDE) CDS UNIQUE IDENTIFIER COMMISSIONER REFERENCE NUMBER COMMISSIONING SERIAL NUMBER EMERGENCY CARE PLACE OF INJURY (LATITUDE) EMERGENCY CARE PLACE OF INJURY (LONGITUDE) ETHNIC CATEGORY GENERAL MEDICAL PRACTICE CODE (PATIENT	min an1 max an35 max an17 max an6 None None max an2	None None None None	None None None -90.000000- 90.000000 -180.000000- 180.000000 None	None None None None	Existing Format/Length states an35- XML Schema allows min an1 max an35 Existing Format/Length states an17- XML Schema allows max an17 Existing Format/Length states an17- XML Schema allows max an6 Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LATITUDE) Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LONGITUDE) Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in other data sets. Second character can be for local use. Format/Length amended to max an2 Default codes not enumerated in the
PLACE OF INJURY (LATITUDE) CDS UNIQUE IDENTIFIER COMMISSIONER REFERENCE NUMBER COMMISSIONING SERIAL NUMBER EMERGENCY CARE PLACE OF INJURY (LATITUDE) EMERGENCY CARE PLACE OF INJURY (LONGITUDE) ETHNIC CATEGORY GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION) GENERAL MEDICAL PRACTITIONER	min an1 max an35 max an17 max an6 None None None	None None None Removed	None None None -90.000000- 90.000000 -180.000000- 180.000000 None None	None None None None None	Existing Format/Length states an35 - XML Schema allows min an1 max an35 Existing Format/Length states an17 - XML Schema allows max an17 Existing Format/Length states an6 - XML Schema allows max an6 Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LATITUDE) Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LONGITUDE) Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in other data sets. Second character can be for local use. Format/Length amended to max an2 Default codes not enumerated in the XML Schema
PLACE OF INJURY (LATITUDE) CDS UNIQUE IDENTIFIER COMMISSIONER REFERENCE NUMBER COMMISSIONING SERIAL NUMBER EMERGENCY CARE PLACE OF INJURY (LATITUDE) EMERGENCY CARE PLACE OF INJURY (LONGITUDE) ETHNIC CATEGORY GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION) GENERAL MEDICAL PRACTITIONER (SPECIFIED) NHS SERVICE AGREEMENT LINE NUMBER ORGANISATION IDENTIFIER (CODE	min an1 max an35 max an17 max an6 None None None None	None None None Removed	None None None -90.000000- 90.000000 -180.000000 None None None None National Codes and default codes not enumerated in the	None None None None None	Existing Format/Length states an35 - XML Schema allows min an1 max an35 Existing Format/Length states an17 - XML Schema allows max an17 Existing Format/Length states an6 - XML Schema allows max an6 Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LATITUDE) Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LONGITUDE) Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in other data sets. Second character can be for local use. Format/Length amended to max an2 Default codes not enumerated in the XML Schema
PLACE OF INJURY (LATITUDE) CDS UNIQUE IDENTIFIER COMMISSIONER REFERENCE NUMBER COMMISSIONING SERIAL NUMBER EMERGENCY CARE PLACE OF INJURY (LATITUDE) EMERGENCY CARE PLACE OF INJURY (LONGITUDE) ETHNIC CATEGORY GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION) GENERAL MEDICAL PRACTITIONER (SPECIFIED) NHS SERVICE AGREEMENT LINE NUMBER ORGANISATION	min an1 max an35 max an17 max an6 None None None None	None None None Removed None	None None -90.000000- 90.000000 -180.000000 None None None None National Codes and default codes not enumerated in the XML Schema	None None None None None None	Existing Format/Length states an35 - XML Schema allows min an1 max an35 Existing Format/Length states an17 - XML Schema allows max an17 Existing Format/Length states an6 - XML Schema allows max an6 Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LATITUDE) Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LONGITUDE) Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in other data sets. Second character can be for local use. Format/Length amended to max an2 Default codes not enumerated in the XML Schema National Codes and default codes not enumerated in the XML Schema Existing Format/Length states an10 -

ORGANISATION IDENTIFIER (CODE OF PROVIDER)					Default codes not enumerated in the XML Schema
ORGANISATION IDENTIFIER (RESIDENCE RESPONSIBILITY)	None	Removed	None	None	Default codes not enumerated in the XML Schema
ORGANISATION SITE IDENTIFIER (DISCHARGE FROM EMERGENCY CARE)	None	Removed	None	None	Default codes not enumerated in the XML Schema
ORGANISATION SITE IDENTIFIER (EMERGENCY CARE ATTENDANCE SOURCE)	None	Removed	None	None	Default codes not enumerated in the XML Schema
ORGANISATION SITE IDENTIFIER (OF TREATMENT)	None	Removed	None	None	Default codes not enumerated in the XML Schema
OVERSEAS VISITOR CHARGING CATEGORY AT CDS ACTIVITY DATE	None	A,B,C,D,E,F,P,9	None	None	National Code X is not valid in CDS V6- 2-2 Type 011 - Emergency Care CDS
POSTCODE OF USUAL ADDRESS	min an2 max an8	None	None	None	Existing Format/Length states max an8 - XML Schema allows min an2 max an8
PROFESSIONAL REGISTRATION ENTRY IDENTIFIER	min an1 max an32	None	None	None	Existing Format/Length states max an32 – XML Schema allows min an1 max an32
PROVIDER REFERENCE NUMBER	max an17		Existing Format/Length states max an32 - XML Schema allows min an1 max an32		
WAITING TIME MEASUREMENT TYPE	None	01,02,09	None	None	Existing Format/Length states an17- XML Schema allows max an17
WAITING TIME MEASUREMENT TYPE	None	01,02,09	None	None	National Codes 03 and 04 not valid in Commissioning Data Sets

COMMISSIONING DATA SET VERSION 6-2-3 XML SCHEMA CONSTRAINTS

Change to XML Schema Constraint: Changed Description

XML Schema constraints applied to the:

- CDS V6-2-3 Type 011 Emergency Care CDS
- CDS V6-2-3 Type 001 CDS Interchange Header
- CDS V6-2-3 Type 002 CDS Interchange Trailer
- CDS V6-2-3 Type 003 CDS Message Header
- CDS V6-2-3 Type 004 CDS Message Trailer
- CDS V6-2-3 Type 005B CDS Transaction Header Group Bulk Update Protocol
- CDS V6-2-3 Type 005N CDS Transaction Header Group Net Change Protocol

- None = The National Codes and Default Codes are included in the XML Schema
- Removed = The National Codes and Default Codes are not included in the XML Schema.

Data Element	XML Schema Format/Length	Allowed Values	Range	Pattern Match	Reason / Comment / XML Choice
ACTIVITY TREATMENT FUNCTION CODE (DECISION TO ADMIT)	None	Removed	None	None	National Codes not enumerated in the XML Schema
AGE AT CDS ACTIVITY DATE	max n3	None	None	None	Existing Format/Length states n3 XML Schema allows max n3
CDS INTERCHANGE APPLICATION REFERENCE	min an1 max an14		Existing Format/Length states max an3 - XML Schema allows max n3		
CDS INTERCHANGE TEST INDICATOR	None	0,1	None	None	Existing Format/Length states an14 XML Schema allows min an1 max an14
CDS INTERCHANGE CONTROL COUNT	max n7		Null value not allowed in XML Schema		

CDS MESSAGE VERSION NUMBER	an6	CDS062	None	None	Existing Format/Length states n7 - XML Schema allows max n7
CDS INTERCHANGE CONTROL REFERENCE	min an1 max an14	None	Message version is hard coded in the XML Schema		
EMERGENCY CARE DEPARTMENT TYPE	an2	Removed	None	None	Existing Format/Length states an14 - XML Schema allows min an1 max an14
CDS INTERCHANGE SENDER IDENTITY	min an1 max an15	None	None	None	Existing Format/Length states an15 - XML Schema allows min an1 max an15
CDS INTERCHANGE RECEIVER IDENTITY	min an1 max an15	None	None	None	Existing Format/Length states an15 - XML Schema allows min an1 max an15
CDS INTERCHANGE TEST INDICATOR	None	0,1	None	None	Null value not allowed in XML Schema
CDS MESSAGE REFERENCE	max n7	None	None	None	Existing Format/Length states an14 – XML Schema allows max n7 to support SUS requirements
CDS MESSAGE VERSION NUMBER	an6	CDS062	None	None	Message version is hard coded in the XML Schema
CDS RECORD IDENTIFIER	min an1 max an35	None	None	None	Existing Format/Length states an35 - XML Schema allows min an1 max an35
CDS UNIQUE IDENTIFIER	min an1 max an35	None	None	None	Existing Format/Length states an35 - XML Schema allows min an1 max an35
COMMISSIONER REFERENCE NUMBER	max an17	None	None	None	Existing Format/Length states an17 - XML Schema allows max an17
COMMISSIONING SERIAL NUMBER	max an6	None	None	None	Existing Format/Length states an6 - XML Schema allows max an6
EMERGENCY CARE DEPARTMENT TYPE	an2	Removed	None	None	National Codes not enumerated in the XML Schema
EMERGENCY CARE PLACE OF INJURY (LATITUDE)	None	None	-90.000000- 90.000000	None	Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LATITUDE)
EMERGENCY CARE PLACE OF INJURY (LONGITUDE)	None	None	-180.000000- 180.000000	None	Range applied to allow correct reporting of EMERGENCY CARE PLACE OF INJURY (LONGITUDE)
ETHNIC CATEGORY	max an2	None	None	None	Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in other data sets. Second character can be for local use. Format/Length amended to max an2
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	None	Removed	None	None	Default codes not enumerated in the XML Schema
GENERAL MEDICAL PRACTITIONER (SPECIFIED)	None	Removed	None	None	National Codes and default codes not enumerated in the XML Schema
NHS SERVICE AGREEMENT LINE NUMBER	max an10	None	National Codes and default codes not enumerated in the XML Schema		
ORGANISATION IDENTIFIER (CODE OF COMMISSIONER)	None	Removed	None	None	Existing Format/Length states an 10 - XML Schema allows max an 10
ORGANISATION IDENTIFIER (CODE OF COMMISSIONER)	None	Removed	None	None	Default codes not enumerated in the XML Schema
ORGANISATION IDENTIFIER (CODE OF PROVIDER)	min an3 max an5	Removed	None	None	Default codes not enumerated in the XML Schema
ORGANISATION IDENTIFIER (RESIDENCE RESPONSIBILITY)	None	Removed	None	None	Default codes not enumerated in the XML Schema
ORGANISATION SITE IDENTIFIER (DISCHARGE FROM EMERGENCY CARE)	None	Removed	None	None	Default codes not enumerated in the XML Schema
ORGANISATION SITE IDENTIFIER (EMERGENCY CARE ATTENDANCE SOURCE)	None	Removed	None	None	Default codes not enumerated in the XML Schema

ORGANISATION SITE IDENTIFIER (OF TREATMENT)	None	Removed	None	None	Default codes not enumerated in the XML Schema
OVERSEAS VISITOR CHARGING CATEGORY AT CDS ACTIVITY DATE	None	A,B,C,D,E,F,P,9	None	None	National Code X is not valid in CDS V6-2-3 Type 011 - Emergency Care CDS
POSTCODE OF USUAL ADDRESS	min an2 max an8	None	None	None	Existing Format/Length states max an8 - XML Schema allows min an2 max an8
PROFESSIONAL REGISTRATION ENTRY IDENTIFIER	min an1 max an32	None	None	None	Existing Format/Length states max an32- XML Schema allows min an1 max an32
PROVIDER REFERENCE NUMBER	max an17		Existing Format/Length states max an32 - XML Schema allows min an1 max an32		
WAITING TIME MEASUREMENT TYPE	None	01,02,09	None	None	Existing Format/Length states an17 - XML Schema allows max an17
WAITING TIME MEASUREMENT TYPE	None	01,02,09	None	None	National Codes 03 and 04 not valid in Commissioning Data Sets

COMMISSIONING DATA SET VERSION 6-2 XML SCHEMA CONSTRAINTS

Change to XML Schema Constraint: Changed Description

XML Schema constraints applied to the Commissioning Data Sets V6-2.

- None = The National Codes and Default Codes are included in the XML Schema
 Removed = The National Codes and Default Codes are not included in the XML Schema.

Data Element	XML Schema	Allowed Values	Range	Pattern	Reason / Comm
Data Element	Format/Length		Kange	Match	XML Choice
ACTIVITY LOCATION TYPE CODE	None	A01,A02,A03,A04,B01,B02,C01,C02,C03,D01,D02,D03, E01,E02,E03,E04,E99,F01,G01,G02,G03,H01,J01,K01,K02, L01,L02,L03,L04,L05,L06,L99,M01,M02,M03,M04,M05, N01,N02,N03,N04,N05,X01	None	None	National Code G0 ⁴ removed (not allow XML Schema)
ADVANCED CARDIOVASCULAR SUPPORT DAYS	max n3	None	None	None	Existing Format/Le states n3 - XML So allows max n3
ADVANCED RESPIRATORY SUPPORT DAYS	max n3	None None	Existing Format/Length states max an3 - XML Schema allows max n3		
ADVANCED RESPIRATORY SUPPORT DAYS	max n3	None	None	None	Existing Format/Le states n3 - XML So allows max n3
AGE AT CDS ACTIVITY DATE	max n3	None None	Existing Format/Length states max an3 - XML Schema allows max n3		
AGE AT CDS ACTIVITY DATE	max n3	None	None	None	Existing Format/Le states n3 - XML So allows max n3
AGE AT CENSUS	max n3	N one	Existing Format/Length states max an3 - XML Schema allows max n3		
AGE AT CENSUS	max n3	None	None	None	Existing Format/Le states n3 - XML So allows max n3
AGE ON ADMISSION	max n3	None	None	None	Existing Format/Le states n3 XML Se allows max n3
ATTENDANCE IDENTIFIER	max an12	N one	Existing Format/Length states max an3 - XML Schema allows max n3		
ATTENDANCE IDENTIFIER	max an12	None	None		Existing Format/Le states an12 - XML Schema allows me an12
BASIC CARDIOVASCULAR SUPPORT DAYS	max n3	None	None	None	Existing Format/Le states n3 - XML So allows max n3
	max n3	None			

BASIC RESPIRATORY SUPPORT DAYS			Existing Format/Length states max an3 - XML Schema allows max n3		
BASIC RESPIRATORY SUPPORT DAYS	max n3	None	None	None	Existing Format/L states n3 - XML S allows max n3
BIRTH WEIGHT	max n4	None	Existing Format/Length states max an3 - XML Schema allows max n3		
BIRTH WEIGHT	max n4	None	None	None	Existing Format/L states n4 - XML S allows max n4
CARE PROFESSIONAL MAIN SPECIALTY CODE	None	100,101,110,120,130,140,141,142,143,145,146,147,148,149,	Existing Format/Length states max an4 - XML Schema allows max n4		
CARE PROFESSIONAL MAIN SPECIALTY CODE	None	100,101,110,120,130,140,141,142,143,145,146,147,148,149, 150,160,170,171,180,190,192,300,301,302,303,304,305,310, 311,312,313,314,315,320,321,325,326,330,340,350,352,360, 361,370,371,400,401,410,420,421,430,450,451,460,501,502, 504,560,600,601,700,710,711,712,713,715,800,810,820,821, 822,823,824,830,831,833,834,900,901,902,903,904,950,960, 199,499		None	National Code 50 removed (not allo XML Schema)
CDS COPY RECIPIENT IDENTITY	min an3 max an12	Removed	None	None	Field size extende future proof for ODS ORGANISA CODE changes
CDS MESSAGE REFERENCE	max n7		Field size extended to future proof for ODS ORGANISATION CODE changes		
CDS INTERCHANGE APPLICATION REFERENCE	max an14	None	None	None	Existing Format/L states n7 - XML S allows max n14 b accepts max n7
CDS MESSAGE VERSION NUMBER	None	CDS062	Existing Format/Length states min an1 max an14 - XML Schema allows max an14		
CDS INTERCHANGE RECEIVER IDENTITY	max an15	None	None	None	Message version coded in the XML Schema
CDS PRIME RECIPIENT IDENTITY	min an3 max an12	Removed	Existing Format/Length states min an1 max an15 - XML Schema allows max an15		
CDS INTERCHANGE SENDER IDENTITY	max an15	None	None	None	Field size extende future proof for ODS ORGANISA CODE changes
CDS SENDER IDENTITY	min an3 max an12	None	Existing Format/Length states min an1 max an15 - XML Schema allows max an15		
CDS MESSAGE REFERENCE	max n7	None	None	None	Field size extende future proof for ODS ORGANISA CODE changes
CDS-UNIQUE IDENTIFIER	max an35	None	Existing Format/Length states max an7 - XML Schema allows max n14 but <u>SUS</u> accepts max n7		
CDS MESSAGE VERSION NUMBER	None	CDS062	None	None	Existing Format/L states an35 - XMI Schema allows m an35
COMMISSIONER REFERENCE NUMBER	max an17	None None	Message version is hard coded in the XML Schema		
CDS PRIME RECIPIENT IDENTITY	min an3 max an12	Removed	None	None	Existing Format/L states an17 XMI Schema allows m an17
COMMISSIONING SERIAL NUMBER	max an6	None	Field size extended to future proof for		

			ODS ORGANISATION CODE changes		
CDS RECORD IDENTIFIER	max an35	None	None	None	Existing Format/Le states an6 - XML Schema allows ma
CONSULTATION MEDIUM USED	None	01,02,03,04	Existing Format/Length states min an1 max an35 - XML Schema allows max an35		<u> </u>
CDS SENDER IDENTITY	min an3 max an12	None	None	None	National Codes 05 and 98 are not use CDS version 6-2
COUNT OF DAYS SUSPENDED	max n4	None	Field size extended to future proof for ODS ORGANISATION CODE changes		
CDS UNIQUE IDENTIFIER	max an35	None	None	None	Existing Format/Le states min an1 ma an35 - XML Schen allows max an35
CONSULTATION MEDIUM USED	None	01,02,03,04	None	None	National Codes 05 07, 08 and 98 are used in CDS version
COUNT OF DAYS SUSPENDED	max n4	None	None	None	Existing Format/Le states n4 - XML So allows max n4
CRITICAL CARE ACTIVITY CODE	None	01,02,03,04,05,06,07,08,09,10,11,12,13,14, 15,16,21,22,23,24,25,26,27,28,29,50,51,52, 53,55,56,57,58,59,60,61,62,63,64,65,66,67, 68,69,70,71,72,73,74,99	None	None	National Codes 80 82, 83, 84, 85, 94, 96 and 97 remove allowed in the XMI Schema)
CRITICAL CARE LEVEL 2 DAYS	max n3	None	None	None	Existing Format/Le states n3 - XML So allows max n3
CRITICAL CARE LEVEL 3 DAYS	max n3	None	Existing Format/Length states max an3 - XML Schema allows max n3		
CRITICAL CARE LEVEL 3 DAYS	max n3	None	None	None	Existing Format/Le states n3 - XML So allows max n3
CRITICAL CARE LOCAL IDENTIFIER	max an8	None	Existing Format/Length states max an3 - XML Schema allows max n3		
DERMATOLOGICAL SUPPORT DAYS	max n3	None	None	None	Existing Format/Le states an8 - XML Schema allows ma
DERMATOLOGICAL SUPPORT DAYS	max n3	None	Existing Format/Length states max an3 - XML Schema allows max n3		
DISCHARGE METHOD CODE (HOSPITAL PROVIDER SPELL)	None	1,2,3,4,5,8,9	None	None	Existing Format/Le states n3 - XML So allows max n3
DISCHARGE METHOD CODE (HOSPITAL PROVIDER SPELL)	None	1,2,3,4,5,8,9	National Codes 6 and 7 are not used in CDS version 6-2		JL
DURATION OF CARE TO PSYCHIATRIC CENSUS DATE	max n5	None	None	None	National Codes 6 ← are not used in CE version 6-2
DURATION OF CARE TO PSYCHIATRIC CENSUS DATE	max n5	None	Existing Format/Length states n5 - XML Schema allows max n5		
DURATION OF DETENTION	max n5	None	None	None	Existing Format/Le states n5 XML Se allows max n5
DURATION OF DETENTION	max n5	None None	Existing Format/Length states n5 - XML Schema allows max n5		
DURATION OF ELECTIVE WAIT	max n4	None	None	None	Existing Format/Le states n5 - XML So allows max n5
DURATION OF ELECTIVE WAIT	max n4	None			

			Existing Format/Length states max an4 - XML Schema allows max n4		
ELECTIVE ADMISSION LIST ENTRY NUMBER	max an12	None	None	None	Existing Format/Le states n4 - XML So allows max n4
ELECTIVE ADMISSION LIST ENTRY NUMBER	max an12	None	Existing Format/Length states an12 - XML Schema allows max an12		
ETHNIC CATEGORY	max an2	None	None	None	Existing Format/Le states an12 - XML Schema allows me an12
EPISODE NUMBER	max an2	N one	Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in other data sets. Second character can be for local use. Format/Length amended to max an2		
GASTRO- INTESTINAL SUPPORT DAYS	max n3	None	None	None	Existing Format/Le states an2 - XML Schema allows ma
ETHNIC CATEGORY	max an2	None	Existing Format/Length states max an3 - XML Schema allows max n3		
GESTATION LENGTH (ASSESSMENT)	n2	None	None	None	Existing Format/Length me fixed length which is incorrect. Unable to change this as i used in other data Second character be for local use. Format/Length am to max an2
GASTRO- INTESTINAL SUPPORT DAYS	max n3	None	Existing Format/Length states an2 - XML Schema allows n2		
GESTATION LENGTH (AT DELIVERY)	n2	None	None	None	Existing Format/Le states n3 - XML St allows max n3
GENERAL MEDICAL PRACTITIONER PRACTICE (ANTENATAL CARE)	min an3 max an12	Removed	Existing Format/Length states an2 - XML Schema allows n2		
GESTATION LENGTH (LABOUR ONSET)	n2	None	None	None	Field size extender future proof for ODS ORGANISAT CODE changes
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	min an3 max an12	Removed	Existing Format/Length states an2 - XML Schema allows n2		
GENERAL MEDICAL PRACTITIONER PRACTICE (ANTENATAL CARE)	min an3 max an12	Removed	None	None	Field size extender future proof for ODS ORGANISAT CODE changes
GENERAL MEDICAL PRACTITIONER (ANTENATAL GARE)	None	Removed	Field size extended to future proof for ODS ORGANISATION CODE changes		
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	min an3 max an12	Removed	None	None	National Codes an default codes not enumerated in the Schema
	None	Removed			

GENERAL MEDICAL PRACTITIONER (SPECIFIED)			Field size extended to future proof for ODS ORGANISATION CODE changes		
GENERAL MEDICAL PRACTITIONER (ANTENATAL CARE)	None	Removed	None	None	National Codes a default codes not enumerated in the Schema
HOSPITAL PROVIDER SPELL NUMBER	max an12	None	National Codes and default codes not enumerated in the XML Schema		
GENERAL MEDICAL PRACTITIONER (SPECIFIED)	None	Removed	None	None	Existing Format/L states an12 - XM Schema allows m an12
INTENDED SITE CODE (OF TREATMENT)	min an3 max an12	Removed	National Codes and default codes not enumerated in the XML Schema		
INTENDED SITE CODE (OF TREATMENT)	min an3 max an12	Removed	None	None	Field size extended future proof for ODS ORGANISA CODE changes
LIVER SUPPORT DAYS	max n3	None	None	None	Existing Format/L states n3 - XML s allows max n3
LOCAL PATIENT IDENTIFIER	max an10	None	Existing Format/Length states max an3 - XML Schema allows max n3		
LOCAL PATIENT IDENTIFIER	max an10	None	None	None	Existing Format/L states an10 - XM Schema allows m an10
LOCAL PATIENT IDENTIFIER (BABY)	max an10	None	None	None	Existing Format/l states an10 - XM Schema allows n an10
LOCAL PATIENT IDENTIFIER (MOTHER)	max an10	None	None	None	Existing Format/l states an10 - XM Schema allows n an10
MENTAL HEALTH ACT LEGAL STATUS CLASSIFICATION CODE (AT CENSUS DATE)	None	01,02,03,04,05,06,07,08,09,10,11,12,13,14, 15,16,17,18,19,20,31,32,34,35,36,37,38	None	None	Additional Nation Codes 37 and 38
MENTAL HEALTH ACT LEGAL STATUS CLASSIFICATION CODE (ON ADMISSION)	None	01,02,03,04,05,06,07,08,09,10,11,12,13,14, 15,16,17,18,19,20,31,32,34,35,36,37,38	None	None	Additional Nation Codes 37 and 38
NEUROLOGICAL SUPPORT DAYS	max n3	None	None	None	Existing Format/L states n3 XML s allows max n3
NHS SERVICE AGREEMENT LINE NUMBER	max an10	None	Existing Format/Length states max an3 - XML Schema allows max n3		
ORGAN SUPPORT MAXIMUM	n2	None	None	None	Existing Format/L states an10 - XM Schema allows n an10
ORGAN SUPPORT	None	None	00-06	None	Range 00-06 allo
ORGANISATION CODE (CODE OF COMMISSIONER)	min an3 max an12	Removed	Existing Format/Length states an2 - XML Schema allows max n2. Range 00-06 allowed		JL
ORGANISATION CODE (CODE OF COMMISSIONER)	min an3 max an12	Removed	None	None	Field size extend future proof for ODS ORGANISA CODE changes
	min an3 max an12	Removed	None	None	

ORGANISATION CODE (CODE OF PROVIDER)					ORGANISATION : CODE changes
ORGANISATION CODE (LOCAL PATIENT IDENTIFIER)	min an3 max an12	None	None	None	Field size extender future proof for ODS ORGANISAT CODE changes
ORGANISATION CODE (LOCAL PATIENT IDENTIFIER (BABY))	min an3 max an12	None	None	None	Field size extended future proof for OE ORGANISATION CODE changes
ORGANISATION CODE (LOCAL PATIENT IDENTIFIER (MOTHER))	min an3 max an12	None	None	None	Field size extended future proof for OE ORGANISATION CODE changes
ORGANISATION CODE (PATIENT PATHWAY IDENTIFIER ISSUER)	min an3 max an12	None	None	None	Field size extended future proof for ODS ORGANISAT CODE changes
ORGANISATION CODE (RESIDENCE RESPONSIBILITY)	min an3 max an12	Removed	None	None	Field size extended future proof for OE ORGANISATION CODE changes
PERSON WEIGHT	n3.n3	None	None	None	Existing Format/Le states max n3.max XML Schema enfo digits before and a the decimal point - removed
PRIMARY DIAGNOSIS (READ)	max an5	None	None	None	Existing Format/Length allc for all clinical classifications -XM
	I I				Schema allows ma
PROVIDER REFERENCE NUMBER	max an17	None	Existing Format/Length allows for all clinical classifications -XML Schema allows max an5		Schema allows m∈
REFERENCE	max an17 None	N one Removed	Format/Length allows for all clinical classifications -XML	None	Existing Format/Le states an17 - XML Schema allows ms
REFERENCE NUMBER			Format/Length allows for all clinical classifications -XML Schema allows max an5	None	Existing Format/Le states an17 – XML Schema allows mo
REFERENCE NUMBER REFERRER CODE	None	Removed	Format/Length allows for all clinical classifications -XML Schema allows max an5 None	None	Existing Format/Le states an17 - XML Schema allows mean17 National Codes and default codes not enumerated in the
REFERRER CODE REFERRER CODE REFERRER CODE REFERRER CODE ORGANISATION	None None min an3 max	Removed Removed	Format/Length allows for all clinical classifications -XML Schema allows max an5 None None	None	Existing Format/Le states an17 - XML Schema allows me an17 National Codes and default codes not enumerated in the Schema Field size extender future proof for ODS ORGANISAT
REFERRER CODE REFERRER CODE REFERRER CODE REFERRING ORGANISATION CODE RENAL SUPPORT	None None min an3 max an12	Removed Removed Removed	Format/Length allows for all clinical classifications -XML Schema allows max an5 None None None	None	Existing Format/Le states an17 - XML Schema allows me an17 National Codes an default codes not enumerated in the Schema Field size extender future proof for ODS ORGANISAT CODE changes Existing Format/Le states n3 - XML St
REFERRER CODE REFERRER CODE REFERRER CODE REFERRER CODE REFERRING ORGANISATION CODE RENAL SUPPORT DAYS SECONDARY DIAGNOSIS (READ) SECONDARY DIAGNOSIS (READ)	None None None min an3 max an12 max n3	Removed Removed Removed None	Format/Length allows for all clinical classifications -XML Schema allows max an5 None None None Existing Format/Length states max an3 - XML	None None	Existing Format/Le states an17 - XML Schema allows me an17 National Codes an default codes not enumerated in the Schema Field size extende future proof for ODS ORGANISAT CODE changes Existing Format/Le states n3 - XML Sc
REFERENCE NUMBER REFERRER CODE REFERRER CODE REFERRER CODE REFERRING ORGANISATION CODE RENAL SUPPORT DAYS SECONDARY DIAGNOSIS (READ) SECONDARY	None None None min an3 max an12 max n3 max an5	Removed Removed Removed None	Format/Length allows for all clinical classifications -XML Schema allows max an5 None None None None Existing Format/Length states max an3 - XML Schema allows max n3	None None	Existing Format/Le states an17 - XML Schema allows man17 National Codes and default codes not enumerated in the Schema Field size extender future proof for ODS ORGANISAT CODE changes Existing Format/Le states n3 - XML Stat

COMMUNITY SERVICES DATA SET CONSTRAINTS

Change to XML Schema Constraint: Changed Description

Data Set constraints applied to the Community Services Data Set.

Data Element	Format/Length	Range	Pattern Match	Reason / Comment
ETHNIC CATEGORY	max an2	None	None	Existing Format/Length means fixed length which
				is incorrect. Unable to change this as it is used
				in other data sets.
				Data Set allows max an2
NHS SERVICE	max an10	None	None	Existing Format/Length means fixed length which
AGREEMENT LINE				is incorrect. Unable to change this as it is used
NUMBER				in other data sets.
				Data Set allows max an10

DEVICES PATIENT LEVEL CONTRACT MONITORING DATA SET CONSTRAINTS

Change to XML Schema Constraint: Changed Description

Data Set constraints applied to the Devices Patient Level Contract Monitoring Data Set. This item is being used for development purposes and has not yet been approved.

Data Element	Format/Length	Range	Pattern Match	Reason / Comment
HOSPITAL PROVIDER	max an12	None	None	Existing Format/Length means fixed length which
SPELL NUMBER				is incorrect. Unable to change this as it is used
				in other data sets.
				Data Set allows max an12
PROVIDER REFERENCE	max an17	None	None	Existing Format/Length means fixed length which
NUMBER				is incorrect. Unable to change this as it is used
				in other data sets.
				Data Set allows max an17

DRUGS PATIENT LEVEL CONTRACT MONITORING DATA SET CONSTRAINTS

Change to XML Schema Constraint: Changed Description

Data Set constraints applied to the <u>Drugs Patient Level Contract Monitoring Data Set</u>.

Data Element	Format/Length	Range	Pattern Match	Reason / Comment
ATTENDANCE IDENTIFIER	max an12	None		Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in other data sets. Data Set allows max an12
HOSPITAL PROVIDER SPELL NUMBER	max an12	None		Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in other data sets. Data Set allows max an12
PROVIDER REFERENCE NUMBER	max an17	None	None	Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in other data sets. Data Set allows max an17

HIV AND AIDS REPORTING DATA SET XML SCHEMA CONSTRAINTS

Change to XML Schema Constraint: Changed Description

XML Schema constraints applied to the $\underline{\sf HIV}$ and $\underline{\sf AIDS}$ Reporting Data $\underline{\sf Set}$.

- None = The National Codes and Default Codes are included in the XML Schema
- Removed = The National Codes and Default Codes are not included in the XML Schema.

Data Element	XML Schema Format/Length	Allowed Values	Range	Pattern Match	Reason / Comment / XML Choice
CONSULTATION MEDIUM USED	None	01,02,03,04,05	None	None	National Code 06 and 98 not applicable - removed
COUNTRY CODE (BIRTH)	None		National Code 06, 07, 08 and 98 not applicable - removed		
COUNTRY CODE (BIRTH)	None	None	None	1 11 11 1	Format pattern applied to allow correct reporting of COUNTRY CODE (BIRTH)
COUNTRY CODE (HIV INFECTION)	None	None	None		Format pattern applied to allow correct reporting of COUNTRY CODE (HIV INFECTION)
	None	None	None		

DATE AND TIME DATA SET CREATED				(19 20)\d\d-(0[1-9] 1 [012])-(0[1-9] 12][0-9] 3 [01])T((0[1-9] 1[0-9])2 [0-3]):([0-5][0-9]):([0-5] [0-9]))	Format pattern applied to allow correct reporting of <u>DATE AND TIME DATA SET CREATED</u>
ETHNIC CATEGORY	max an2	None	None	None	Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in other data sets. Second character can be for local use. Format/Length amended to max an2.
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	min an3 max an12	Removed	None	None	Field size extended to future proof for ODS ORGANISATION CODE changes
HARS MESSAGE VERSION IDENTIFIER	None	None	None	\d.\d.\d	Format pattern applied to allow correct reporting of <u>HARS MESSAGE VERSION</u> <u>IDENTIFIER</u>
HARS SUBMISSION IDENTIFIER	None	None	None	[0-9A-F]{8}-[0-9A-F]{4} -[0-9A-F]{4}-[0-9A-F]{4} -[0-9A-F]{12}	Format pattern applied to allow correct reporting of <u>HARS SUBMISSION</u> <u>IDENTIFIER</u>
HARS UNIQUE IDENTIFIER	None	None	None	[0-9A-F]{8}-[0-9A-F]{4} -[0-9A-F]{4}-[0-9A-F]{4} -[0-9A-F]{12}	Format pattern applied to allow correct reporting of HARS UNIQUE IDENTIFIER
ORGANISATION CODE (CODE OF PROVIDER)	min an3 max an12	Removed	None	None	Field size extended to future proof for ODS ORGANISATION CODE changes
ORGANISATION CODE (CODE OF SUBMITTING ORGANISATION)	min an3 max an12	None	None	None	Field size extended to future proof for ODS ORGANISATION CODE changes
SITE CODE (OF PREVIOUS HIV CARE)	min an3 max an12	Removed	None	None	Field size extended to future proof for ODS ORGANISATION SITE CODE changes
SITE CODE (OF TREATMENT)	min an3 max an12	Removed	None	None	Field size extended to future proof for ODS ORGANISATION SITE CODE changes
SITE CODE (REFERRED TO FOR SHARED HIV CARE)	min an3 max an12	None	None	None	Field size extended to future proof for ODS ORGANISATION SITE CODE changes
TEST OF RECENT INFECTION RESULT (HIV)	None	None	None	\d{1,3}\.\d{1}	Format pattern applied to allow correct reporting of TEST OF RECENT INFECTION RESULT (HIV)
YEAR AND MONTH FIRST STARTED ANTIRETROVIRAL THERAPY	None	None	None	(19 20)\d\d-(0[1-9] 1 [012])	Format pattern applied to allow correct reporting of YEAR AND MONTH FIRST STARTED ANTIRETROVIRAL THERAPY
YEAR AND MONTH OF LAST CARE PROFESSIONAL HIV COMMUNICATION	None	None	None	(19 20)\d\d-(0[1-9] 1 [012])	Format pattern applied to allow correct reporting of YEAR AND MONTH OF LAST CARE PROFESSIONAL HIV COMMUNICATION
YEAR AND MONTH OF LAST NEGATIVE HIV TEST	None	None	None	(19 20)\d\d-(0[1-9] 1 [012])	Format pattern applied to allow correct reporting of <u>YEAR AND MONTH OF LAST NEGATIVE HIV TEST</u>
YEAR OF DIAGNOSIS OUTSIDE UNITED KINGDOM (HIV)	None	None	None	(19 20){1}\d\d	Format pattern applied to allow correct reporting of YEAR OF DIAGNOSIS OUTSIDE UNITED KINGDOM (HIV)
YEAR OF UK ENTRY	None	None	None	(19 20){1}\d\d	Format pattern applied to allow correct reporting of YEAR OF UK ENTRY

MATERNITY SERVICES DATA SET CONSTRAINTS (RETIRED)_ renamed from MATERNITY SERVICES DATA SET CONSTRAINTS

Change to XML Schema Constraint: Changed status to Retired, Name, Description

Data set constraints applied to the Maternity Services Data Set. This item has been retired from the NHS Data Model and Dictionary.

Data Element	XML Schema Format/Length	Allowed Values	Range	Pattern Match	Reason / Comment / XML Choice
HOSPITAL PROVIDER SPELL NUMBER	max an12	None	None		Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in other data sets. Second character can be for local use. Data Set allows max an12

The last live version of this item is available in the January 2021 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing <u>information.standards@nhs.net</u> with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

MATERNITY SERVICES DATA SET CONSTRAINTS (RETIRED)_ renamed from MATERNITY SERVICES DATA SET CONSTRAINTS

Change to XML Schema Constraint: Changed status to Retired, Name, Description

- Retired Maternity Services Data Set Constraints
- Changed Name from Data_Dictionary.Messages.Message_Documentation.Data_Set_Constraints.Maternity_Services_Data_Set_Constraints to Retired.Data_Dictionary.Messages.Message_Documentation.Maternity_Services_Data_Set_Constraints
- Changed Description

MENTAL HEALTH SERVICES DATA SET CONSTRAINTS

Change to XML Schema Constraint: Changed Description

Data Set constraints applied to the Mental Health Services Data Set.

Data Element	Format/Length	Range	Pattern Match	Reason / Comment
ETHNIC CATEGORY	max an2	None	None	Existing Format/Length means fixed length which
				is incorrect. Unable to change this as it is used
				in other data sets.
				Data Set allows max an2
HOSPITAL PROVIDER	max an12	None	None	Existing Format/Length means fixed length which
SPELL NUMBER				is incorrect. Unable to change this as it is used
				in other data sets.
				Data Set allows max an12
NHS SERVICE	max an10	None	None	Existing Format/Length means fixed length which
AGREEMENT LINE				is incorrect. Unable to change this as it is used
NUMBER				in other data sets.
				Data Set allows max an10

NATIONAL NEONATAL DATA SET CONSTRAINTS

Change to XML Schema Constraint: New XML Schema Constraint

Data Set constraints applied to the National Neonatal Data Set.

Data Element	Format/Length	Range	Pattern Match	Reason / Comment
BIRTH WEIGHT	n4	None		Existing Format/Length states max an4 - Data Set allows n4
GESTATION LENGTH (AT DELIVERY)	n2	None	None	Existing Format/Length states an2 - Data Set allows n2

PATIENT LEVEL CONTRACT MONITORING DATA SET CONSTRAINTS

Change to XML Schema Constraint: Changed Description

Data Set constraints applied to the Patient Level Contract Monitoring Data Set.

Data Element	Format/Length	Range	Pattern Match	Reason / Comment
	max an12	None	None	Existing Format/Length means fixed length which
ATTENDANCE IDENTIFIER				is incorrect. Unable to change this as it is used
				in other data sets.
				Data Set allows max an12
	max an12	None	None	Existing Format/Length means fixed length which
HOSPITAL PROVIDER				is incorrect. Unable to change this as it is used
SPELL NUMBER				in other data sets.
				Data Set allows max an12
NHS SERVICE	max an10	None	None	Existing Format/Length means fixed length which
AGREEMENT LINE				is incorrect. Unable to change this as it is used
NUMBER				in other data sets.
				Data Set allows max an10
PROVIDER REFERENCE	max an17	None	None	Existing Format/Length means fixed length which
<u>NUMBER</u>				is incorrect. Unable to change this as it is used
1				in other data sets.
				Data Set allows max an17

PLICS ACUTE ADMITTED PATIENT CARE DATA SET CONSTRAINTS

Change to XML Schema Constraint: Changed Description

Data Set constraints applied to the Patient Level Information Costing System Acute Data Set - Admitted Patient Care.

Data Element	Format/Length	Range	Pattern Match	Reason / Comment
CDS UNIQUE IDENTIFIER	max an35	None		Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in other data sets. Data Set allows max an35
EPISODE NUMBER	max n2	None		Existing Format/Length means fixed length which is incorrect. Unable to change this as it is used in

				other data sets.
				Data Set allows max n2
HOSPITAL PROVIDER	max an12	None	None	Existing Format/Length means fixed length which
SPELL NUMBER				is incorrect. Unable to change this as it is used
				in other data sets.
				Data Set allows max an12
ORGANISATION	an3	None	None	an5 and an6 is not applicable for the Patient
IDENTIFIER (CODE OF				Level Information Costing System Acute Data
PROVIDER)				Set - Admitted Patient Care.
<u>ORGANISATION</u>	min an3 max an5	None	None	an6 is not applicable for the Patient Level
IDENTIFIER (CODE OF				Information Costing System Acute Data Set -
SUBMITTING				Admitted Patient Care.
<u>ORGANISATION)</u>				

PLICS MENTAL HEALTH ADMITTED PATIENT CARE DATA SET CONSTRAINTS

Change to XML Schema Constraint: Changed Description

Data Set constraints applied to the Patient Level Information Costing System Mental Health Data Set - Admitted Patient Care.

Data Element	Format/Length	Range	Pattern Match	Reason / Comment
ORGANISATION IDENTIFIER (CODE OF PROVIDER)	an3	None	None	an5 and an6 is not applicable for the Patient Level Information Costing System Mental Health Data Set - Admitted Patient Care.
ORGANISATION IDENTIFIER (CODE OF SUBMITTING ORGANISATION)	min an3 max an5	None	None	an6 is not applicable for the Patient Level Information Costing System Mental Health Data Set - Admitted Patient Care.
HOSPITAL PROVIDER SPELL NUMBER	max an12	None	None	Existing Format/Length states an12 - CDS XML Schema allows max an12.

For enquiries about this Change Request, please email information.standards@nhs.net

