

## Health and Social Care Information Centre

### NHS Data Model and Dictionary Service

**Type:** Data Dictionary Change Notice  
**Reference:** 1439  
**Version No:** 1.0  
**Subject:** Retirement of Review of Central Returns (ROCR) Returns  
**Effective Date:** Immediate  
**Reason for Change:** Retirement of Data Standards  
**Publication Date:** 21 January 2014

#### Background:

The recent Department of Health Fundamental Review of Data Returns has recommended the discontinuation of a number of regular data collections.

A number of Central Returns are to be discontinued as they will cease after the conclusion of the Fundamental Review.

This Data Dictionary Change Notice (DDCN) retires the following Data Sets in the NHS Data Model and Dictionary which are discontinued:

- Admitted Patient Flows Data Set
- Admitted Patient Stocks Data Set
- Bookings Admitted Patient and Out-Patient Provider Data Set
- Choose and Book Utilisation Commissioner Data Set
- National Direct Access Audiology Patient Tracking List Data Set
- Out-Patient Flows Data Set
- Out-Patient Stocks Data Set
- Summarised Activity Flows Data Set
- Summarised Stocks Data Set

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

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

#### Summary of changes:

##### Diagrams

<a href="#">ACTIVITY DIAGRAM</a>	Changed Diagram
<a href="#">APPOINTMENTS DIAGRAM</a>	Changed Diagram
<a href="#">CARE PROFESSIONAL DIAGRAM</a>	Changed Diagram
<a href="#">COMMUNITY DIAGRAM</a>	Changed Diagram
<a href="#">HEALTH PROGRAMME DIAGRAM</a>	Changed Diagram
<a href="#">IMPROVING ACCESS TO PSYCHOLOGICAL THERAPIES DIAGRAM</a>	Changed Diagram
<a href="#">LISTS DIAGRAM</a>	Changed Diagram
<a href="#">MATERNITY SERVICES SECONDARY USES DIAGRAM</a>	Changed Diagram
<a href="#">PATIENT PATHWAY DIAGRAM</a>	Changed Diagram
<a href="#">REFERRAL REQUEST DIAGRAM</a>	Changed Diagram

##### Data Set

<a href="#">ADMITTED PATIENT FLOWS DATA SET (RETIRED)</a> renamed from <a href="#">ADMITTED PATIENT FLOWS DATA SET</a>	Changed status to Retired, Name, Description
<a href="#">ADMITTED PATIENT STOCKS DATA SET (RETIRED)</a> renamed from <a href="#">ADMITTED PATIENT STOCKS DATA SET</a>	Changed status to Retired, Name, Description
<a href="#">BOOKINGS ADMITTED PATIENT AND OUT-PATIENT PROVIDER DATA SET (RETIRED)</a> renamed from <a href="#">BOOKINGS ADMITTED PATIENT AND OUT-PATIENT PROVIDER DATA SET</a>	Changed status to Retired, Name, Description
<a href="#">CHOOSE AND BOOK UTILISATION COMMISSIONER DATA SET (RETIRED)</a> renamed from <a href="#">CHOOSE AND BOOK UTILISATION COMMISSIONER DATA SET</a>	Changed status to Retired, Name, Description
<a href="#">NATIONAL DIRECT ACCESS AUDIOLOGY PATIENT TRACKING LIST DATA SET (RETIRED)</a> renamed from <a href="#">NATIONAL DIRECT ACCESS AUDIOLOGY PATIENT TRACKING LIST DATA SET</a>	Changed status to Retired, Name, Description
<a href="#">OUT-PATIENT FLOWS DATA SET (RETIRED)</a> renamed from <a href="#">OUT-PATIENT FLOWS DATA SET</a>	Changed status to Retired, Name, Description
<a href="#">OUT-PATIENT STOCKS DATA SET (RETIRED)</a> renamed from <a href="#">OUT-PATIENT STOCKS DATA SET</a>	Changed status to Retired, Name, Description
<a href="#">SUMMARISED ACTIVITY FLOWS DATA SET (RETIRED)</a> renamed from <a href="#">SUMMARISED ACTIVITY FLOWS DATA SET</a>	Changed status to Retired, Name, Description
<a href="#">SUMMARISED STOCKS DATA SET (RETIRED)</a> renamed from <a href="#">SUMMARISED STOCKS DATA SET</a>	Changed status to Retired, Name, Description

##### Supporting Information

<a href="#">ADMITTED PATIENT EFFECTIVE WAITING TIME CALCULATION (RETIRED)</a> renamed from <a href="#">ADMITTED PATIENT EFFECTIVE WAITING TIME CALCULATION</a>	Changed status to Retired, Name, Description
<a href="#">ADMITTED PATIENT FLOWS DATA SET OVERVIEW (RETIRED)</a> renamed from <a href="#">ADMITTED PATIENT FLOWS DATA SET OVERVIEW</a>	Changed status to Retired, Name, Description
<a href="#">ADMITTED PATIENT STOCKS DATA SET OVERVIEW (RETIRED)</a> renamed from <a href="#">ADMITTED PATIENT STOCKS DATA SET OVERVIEW</a>	Changed status to Retired, Name, Description
<a href="#">APPOINTMENT REQUEST</a>	Changed Description
<a href="#">BOOKINGS ADMITTED PATIENT AND OUT-PATIENT PROVIDER DATA SET OVERVIEW (RETIRED)</a> renamed from <a href="#">BOOKINGS ADMITTED PATIENT AND OUT-PATIENT PROVIDER DATA SET OVERVIEW</a>	Changed status to Retired, Name, Description
<a href="#">CENTRAL RETURN DATA SETS MENU</a>	Changed Description
<a href="#">CHOOSE AND BOOK UTILISATION COMMISSIONER DATA SET OVERVIEW (RETIRED)</a> renamed from <a href="#">CHOOSE AND BOOK UTILISATION COMMISSIONER DATA SET OVERVIEW</a>	Changed status to Retired, Name, Description
<a href="#">DEFERRED ADMISSION (RETIRED)</a> renamed from <a href="#">DEFERRED ADMISSION</a>	Changed status to Retired, Name, Description

<a href="#">NATIONAL DIRECT ACCESS AUDIOLOGY PATIENT TRACKING LIST DATA SET OVERVIEW (RETIRED)</a> renamed from <a href="#">NATIONAL DIRECT ACCESS AUDIOLOGY PATIENT TRACKING LIST DATA SET OVERVIEW</a>	Description
<a href="#">OTHER APPOINTMENT</a>	Changed status to Retired, Name, Description
<a href="#">OUT-PATIENT APPOINTMENT</a>	Changed Description
<a href="#">OUT-PATIENT EFFECTIVE WAITING TIME CALCULATION (RETIRED)</a> renamed from <a href="#">OUT-PATIENT EFFECTIVE WAITING TIME CALCULATION</a>	Changed Description
<a href="#">OUT-PATIENT FLOWS DATA SET OVERVIEW (RETIRED)</a> renamed from <a href="#">OUT-PATIENT FLOWS DATA SET OVERVIEW</a>	Changed status to Retired, Name, Description
<a href="#">OUT-PATIENT STOCKS DATA SET OVERVIEW (RETIRED)</a> renamed from <a href="#">OUT-PATIENT STOCKS DATA SET OVERVIEW</a>	Changed status to Retired, Name, Description
<a href="#">SELF-DEFERRED ADMISSION (RETIRED)</a> renamed from <a href="#">SELF-DEFERRED ADMISSION</a>	Changed status to Retired, Name, Description
<a href="#">SUMMARISED ACTIVITY FLOWS DATA SET OVERVIEW (RETIRED)</a> renamed from <a href="#">SUMMARISED ACTIVITY FLOWS DATA SET OVERVIEW</a>	Changed status to Retired, Name, Description
<a href="#">SUMMARISED STOCKS DATA SET OVERVIEW (RETIRED)</a> renamed from <a href="#">SUMMARISED STOCKS DATA SET OVERVIEW</a>	Changed status to Retired, Name, Description
<a href="#">SUSPENDED PATIENT (RETIRED)</a> renamed from <a href="#">SUSPENDED PATIENT</a>	Changed status to Retired, Name, Description
<b>Class Definitions</b>	
<a href="#">APPOINTMENT OFFER</a>	Changed Attributes
<a href="#">APPOINTMENT SLOT</a>	Changed Description, Attributes
<a href="#">ELECTIVE ADMISSION LIST ENTRY</a>	Changed Attributes
<a href="#">OFFER OF ADMISSION</a>	Changed Description, Attributes
<a href="#">ORGANISATION SITE</a>	Changed Attributes
<a href="#">REFERRAL REQUEST</a>	Changed Attributes
<a href="#">SERVICE REQUEST</a>	Changed Attributes
<b>Attribute Definitions</b>	
<a href="#">APPOINTMENT BOOKING SYSTEM TYPE (RETIRED)</a> renamed from <a href="#">APPOINTMENT BOOKING SYSTEM TYPE</a>	Changed status to Retired, Name, Description
<a href="#">APPOINTMENT OFFER ACCEPTED OR REFUSED</a>	Changed Description
<a href="#">APPOINTMENT OFFER SLOT STATUS (RETIRED)</a> renamed from <a href="#">APPOINTMENT OFFER SLOT STATUS</a>	Changed status to Retired, Name, Description
<a href="#">APPOINTMENT OFFER VERBAL OR WRITTEN (RETIRED)</a> renamed from <a href="#">APPOINTMENT OFFER VERBAL OR WRITTEN</a>	Changed status to Retired, Name, Description
<a href="#">APPOINTMENT SLOT STATUS (RETIRED)</a> renamed from <a href="#">APPOINTMENT SLOT STATUS</a>	Changed status to Retired, Name, Description
<a href="#">APPOINTMENT SLOT TYPE (RETIRED)</a> renamed from <a href="#">APPOINTMENT SLOT TYPE</a>	Changed status to Retired, Name, Description
<a href="#">ELECTIVE ADMISSION EFFECTIVE WAIT START DATE (RETIRED)</a> renamed from <a href="#">ELECTIVE ADMISSION EFFECTIVE WAIT START DATE</a>	Changed status to Retired, Name, Description
<a href="#">FIRST ATTENDANCE EFFECTIVE WAIT START DATE (RETIRED)</a> renamed from <a href="#">FIRST ATTENDANCE EFFECTIVE WAIT START DATE</a>	Changed status to Retired, Name, Description
<a href="#">OFFER OF ADMISSION ACCEPTED OR REFUSED (RETIRED)</a> renamed from <a href="#">OFFER OF ADMISSION ACCEPTED OR REFUSED</a>	Changed status to Retired, Name, Description
<a href="#">OFFER OF ADMISSION VERBAL OR WRITTEN (RETIRED)</a> renamed from <a href="#">OFFER OF ADMISSION VERBAL OR WRITTEN</a>	Changed status to Retired, Name, Description
<a href="#">ORGANISATION SITE TREATMENT CENTRE (RETIRED)</a> renamed from <a href="#">ORGANISATION SITE TREATMENT CENTRE</a>	Changed status to Retired, Name, Description
<a href="#">UNIQUE BOOKING REFERENCE NUMBER (CONVERTED)</a>	Changed Description
<a href="#">WRITTEN REFERRAL REQUEST INDICATOR (RETIRED)</a> renamed from <a href="#">WRITTEN REFERRAL REQUEST INDICATOR</a>	Changed status to Retired, Name, Description
<b>Data Elements</b>	
<a href="#">ADMISSION INTENDED PROCEDURE (RETIRED)</a> renamed from <a href="#">ADMISSION INTENDED PROCEDURE</a>	Changed status to Retired, Name, Description
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (DAY CASE) (RETIRED)</a> renamed from <a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (DAY CASE)</a>	Changed status to Retired, Name, Description
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (IS TREATMENT CENTRES) (RETIRED)</a> renamed from <a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (IS TREATMENT CENTRES)</a>	Changed status to Retired, Name, Description
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (NHS TREATMENT CENTRES) (RETIRED)</a> renamed from <a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (NHS TREATMENT CENTRES)</a>	Changed status to Retired, Name, Description
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (ORDINARY) (RETIRED)</a> renamed from <a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (ORDINARY)</a>	Changed status to Retired, Name, Description
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (PLANNED) (RETIRED)</a> renamed from <a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (PLANNED)</a>	Changed status to Retired, Name, Description
<a href="#">ADMITTED PATIENT NHS ADMISSIONS (RETIRED)</a> renamed from <a href="#">ADMITTED PATIENT NHS ADMISSIONS</a>	Changed status to Retired, Name, Description
<a href="#">ADMITTED PATIENT NON-NHS ADMISSIONS (RETIRED)</a> renamed from <a href="#">ADMITTED PATIENT NON-NHS ADMISSIONS</a>	Changed status to Retired, Name, Description
<a href="#">ADMITTED PATIENT TOTAL NON-ELECTIVE ADMISSIONS (RETIRED)</a> renamed from <a href="#">ADMITTED PATIENT TOTAL NON-ELECTIVE ADMISSIONS</a>	Changed status to Retired, Name, Description
<a href="#">COMMISSIONER OR PROVIDER STATUS INDICATOR (RETIRED)</a> renamed from <a href="#">COMMISSIONER OR PROVIDER STATUS INDICATOR</a>	Changed status to Retired, Name, Description
<a href="#">DATA SET PREPARATION DATE (RETIRED)</a> renamed from <a href="#">DATA SET PREPARATION DATE</a>	Changed status to Retired, Name, Description
<a href="#">DATA SET PREPARATION TIME (RETIRED)</a> renamed from <a href="#">DATA SET PREPARATION TIME</a>	Changed status to Retired, Name, Description
<a href="#">DECISIONS TO ADMIT (BOOKED DAY CASE) (RETIRED)</a> renamed from <a href="#">DECISIONS TO ADMIT (BOOKED DAY CASE)</a>	Changed status to Retired, Name, Description
<a href="#">DECISIONS TO ADMIT (BOOKED ORDINARY) (RETIRED)</a> renamed from <a href="#">DECISIONS TO ADMIT (BOOKED ORDINARY)</a>	Changed status to Retired, Name, Description
<a href="#">DECISIONS TO ADMIT (DAY CASE) (RETIRED)</a> renamed from <a href="#">DECISIONS TO ADMIT (DAY CASE)</a>	Changed status to Retired, Name, Description
<a href="#">DECISIONS TO ADMIT (ORDINARY) (RETIRED)</a> renamed from <a href="#">DECISIONS TO ADMIT (ORDINARY)</a>	Changed status to Retired, Name, Description
<a href="#">DECISIONS TO ADMIT NUMBER (RETIRED)</a> renamed from <a href="#">DECISIONS TO ADMIT NUMBER</a>	Changed status to Retired, Name, Description

<a href="#"><u>DEFERRED ADMISSIONS (DAY CASE) (RETIRED)</u></a> renamed from <a href="#"><u>DEFERRED ADMISSIONS (DAY CASE)</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>DEFERRED ADMISSIONS (ORDINARY) (RETIRED)</u></a> renamed from <a href="#"><u>DEFERRED ADMISSIONS (ORDINARY)</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>GP WRITTEN REFERRALS (RETIRED)</u></a> renamed from <a href="#"><u>GP WRITTEN REFERRALS</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>GP WRITTEN REFERRALS BOOKED (RETIRED)</u></a> renamed from <a href="#"><u>GP WRITTEN REFERRALS BOOKED</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>GP WRITTEN REFERRALS MADE (RETIRED)</u></a> renamed from <a href="#"><u>GP WRITTEN REFERRALS MADE</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>GP WRITTEN REFERRALS SEEN (RETIRED)</u></a> renamed from <a href="#"><u>GP WRITTEN REFERRALS SEEN</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>NUMBER OF OUT-PATIENT CONVERTED UNIQUE BOOKING REFERENCE NUMBERS (RETIRED)</u></a> renamed from <a href="#"><u>NUMBER OF OUT-PATIENT CONVERTED UNIQUE BOOKING REFERENCE NUMBERS</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>OTHER REFERRALS (RETIRED)</u></a> renamed from <a href="#"><u>OTHER REFERRALS</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>OUT-PATIENT EFFECTIVE WAITS (RETIRED)</u></a> renamed from <a href="#"><u>OUT-PATIENT EFFECTIVE WAITS</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>OUT-PATIENT FIRST APPOINTMENTS DID NOT ATTEND (RETIRED)</u></a> renamed from <a href="#"><u>OUT-PATIENT FIRST APPOINTMENTS DID NOT ATTEND</u></a>	Changed status to Retired, Name, Description
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<a href="#"><u>OUT-PATIENT FOLLOW-UP APPOINTMENTS ATTENDANCES SEEN (RETIRED)</u></a> renamed from <a href="#"><u>OUT-PATIENT FOLLOW-UP APPOINTMENTS ATTENDANCES SEEN</u></a>	Changed status to Retired, Name, Description
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<a href="#"><u>OUT-PATIENTS WAITING (RETIRED)</u></a> renamed from <a href="#"><u>OUT-PATIENTS WAITING</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>OUT-PATIENT WAITING TIME BAND (RETIRED)</u></a> renamed from <a href="#"><u>OUT-PATIENT WAITING TIME BAND</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>PATIENTS ADMITTED (DAY CASE) (RETIRED)</u></a> renamed from <a href="#"><u>PATIENTS ADMITTED (DAY CASE)</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>PATIENTS ADMITTED (ORDINARY) (RETIRED)</u></a> renamed from <a href="#"><u>PATIENTS ADMITTED (ORDINARY)</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>PATIENTS ADMITTED NUMBER (RETIRED)</u></a> renamed from <a href="#"><u>PATIENTS ADMITTED NUMBER</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>PATIENTS FAILED TO ATTEND (DAY CASE) (RETIRED)</u></a> renamed from <a href="#"><u>PATIENTS FAILED TO ATTEND (DAY CASE)</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>PATIENTS FAILED TO ATTEND (ORDINARY) (RETIRED)</u></a> renamed from <a href="#"><u>PATIENTS FAILED TO ATTEND (ORDINARY)</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>PATIENTS FAILED TO ATTEND (RETIRED)</u></a> renamed from <a href="#"><u>PATIENTS FAILED TO ATTEND</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>PATIENTS SUSPENDED (DAY CASE) (RETIRED)</u></a> renamed from <a href="#"><u>PATIENTS SUSPENDED (DAY CASE)</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>PATIENTS SUSPENDED (ORDINARY) (RETIRED)</u></a> renamed from <a href="#"><u>PATIENTS SUSPENDED (ORDINARY)</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>PATIENTS WAITING FOR ADMISSION (RETIRED)</u></a> renamed from <a href="#"><u>PATIENTS WAITING FOR ADMISSION</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>PATIENTS WAITING FOR ADMISSION TIME BAND (RETIRED)</u></a> renamed from <a href="#"><u>PATIENTS WAITING FOR ADMISSION TIME BAND</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>REFERRAL TO TREATMENT PERIOD COMPLETED BY NON-ADMITTED PATIENT IN LAST 7 DAYS (NOT WITHIN 18 WEEKS) (RETIRED)</u></a> renamed from <a href="#"><u>REFERRAL TO TREATMENT PERIOD COMPLETED BY NON-ADMITTED PATIENT IN LAST 7 DAYS (NOT WITHIN 18 WEEKS)</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (UNKNOWN START DATE) (RETIRED)</u></a> renamed from <a href="#"><u>REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (UNKNOWN START DATE)</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (WITHIN 18 WEEKS) (RETIRED)</u></a> renamed from <a href="#"><u>REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (WITHIN 18 WEEKS)</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE (RETIRED)</u></a> renamed from <a href="#"><u>REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED IN LAST 7 DAYS (RETIRED)</u></a> renamed from <a href="#"><u>REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED IN LAST 7 DAYS</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED TOTAL (RETIRED)</u></a> renamed from <a href="#"><u>REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED TOTAL</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS TIME BAND (RETIRED)</u></a> renamed from <a href="#"><u>REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS TIME BAND</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>REFERRAL TO TREATMENT PERIOD INCOMPLETE WITHIN TIME BAND (NON-ADMITTED PATIENTS) (RETIRED)</u></a>	New Data Element
<a href="#"><u>REMOVALS OTHER THAN ADMISSION (DAY CASE) (RETIRED)</u></a> renamed from <a href="#"><u>REMOVALS OTHER THAN ADMISSION (DAY CASE)</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>REMOVALS OTHER THAN ADMISSION (ORDINARY) (RETIRED)</u></a> renamed from <a href="#"><u>REMOVALS OTHER THAN ADMISSION (ORDINARY)</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>REMOVALS OTHER THAN ADMISSION (RETIRED)</u></a> renamed from <a href="#"><u>REMOVALS OTHER THAN ADMISSION</u></a>	Changed status to Retired, Name, Description
<a href="#"><u>WAITING FOR ADMISSION INTENDED MANAGEMENT (RETIRED)</u></a> renamed from <a href="#"><u>WAITING FOR ADMISSION INTENDED MANAGEMENT</u></a>	Changed status to Retired, Name, Description

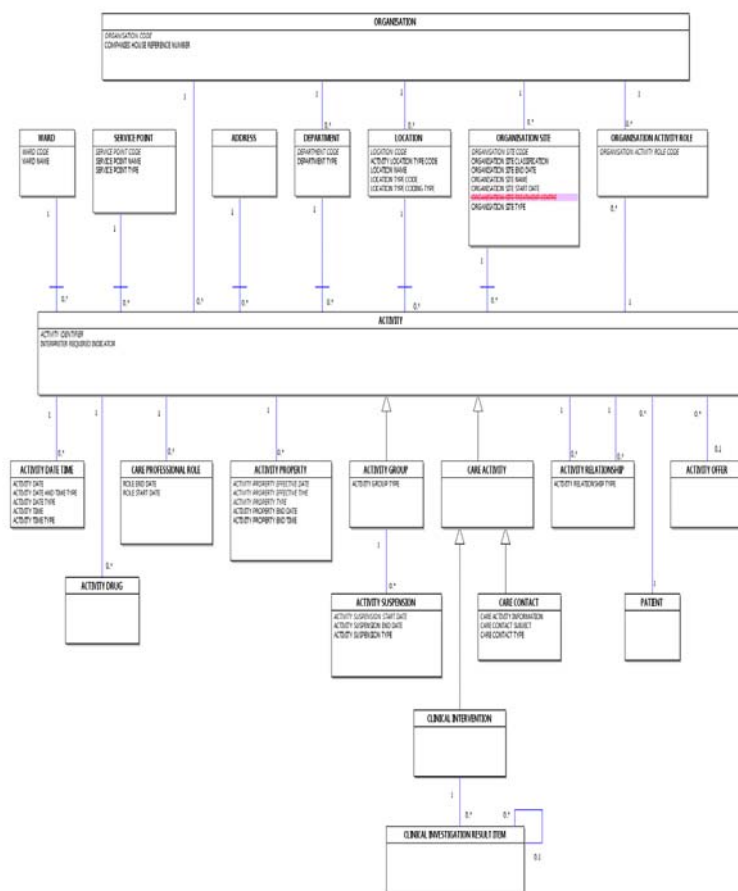
**Date:** 21 January 2014

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

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

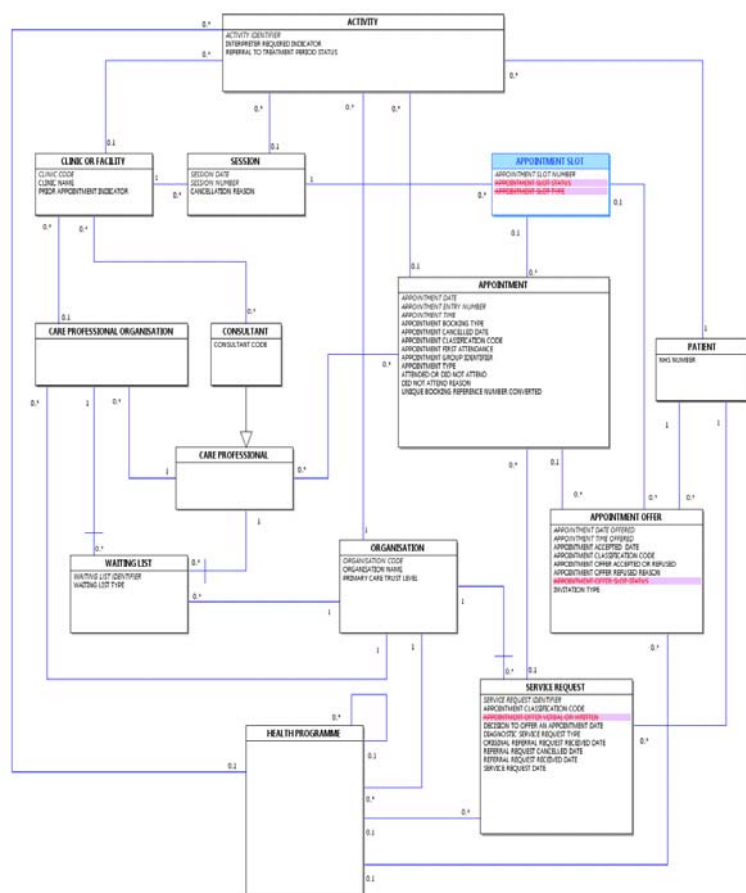
## ACTIVITY DIAGRAM

Change to Diagram: Changed Diagram



## APPOINTMENTS DIAGRAM

Change to Diagram: Changed Diagram



Change to Diagram: Changed Diagram

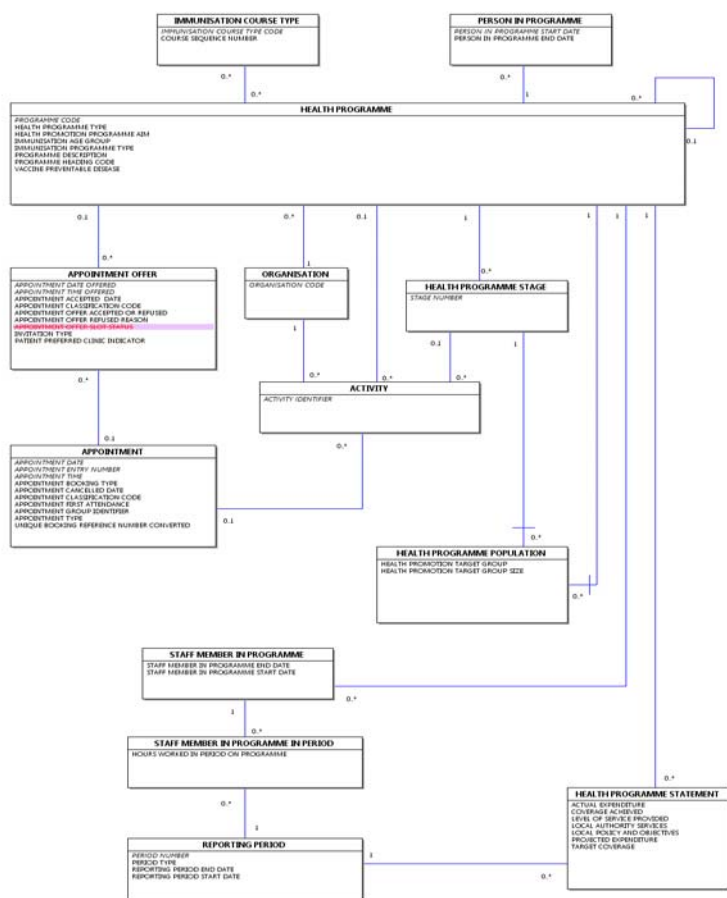


Change to Diagram: Changed Diagram



## HEALTH PROGRAMME DIAGRAM

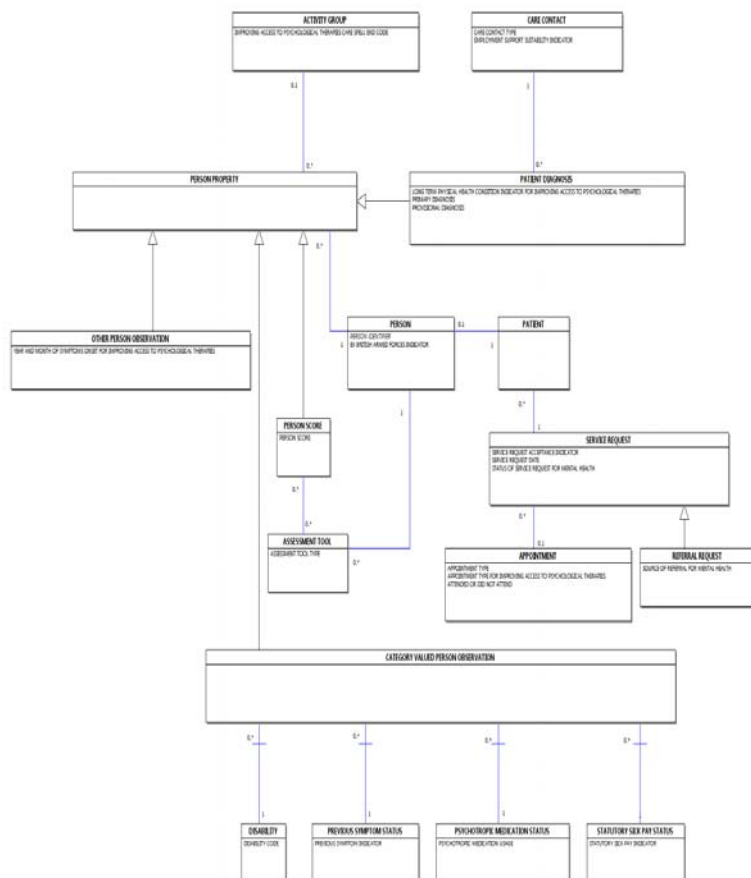
Change to Diagram: Changed Diagram





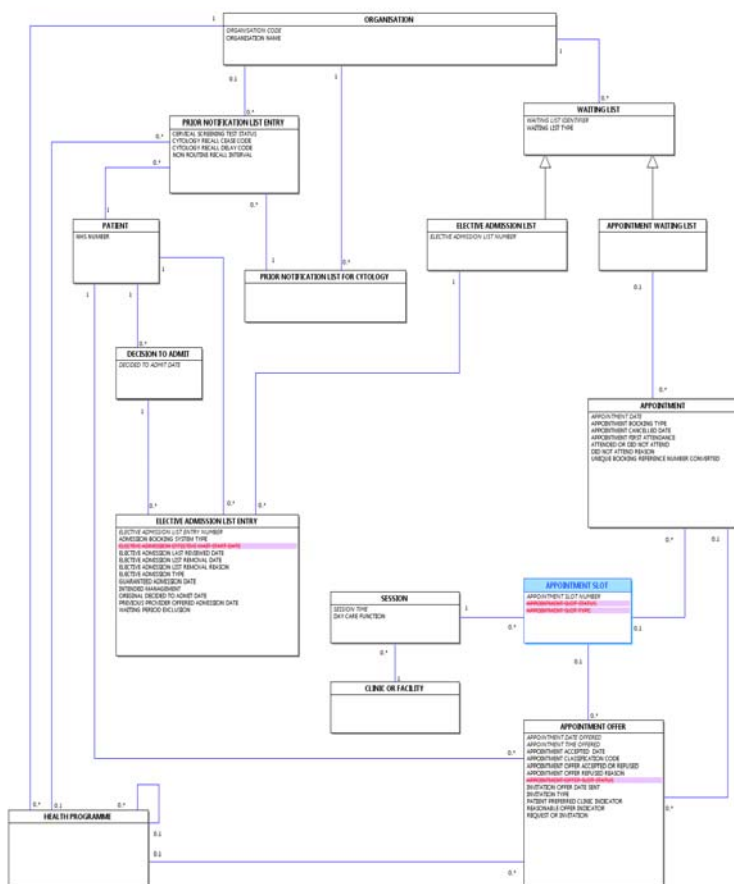
## IMPROVING ACCESS TO PSYCHOLOGICAL THERAPIES DIAGRAM

Change to Diagram: Changed Diagram



## LISTS DIAGRAM

Change to Diagram: Changed Diagram

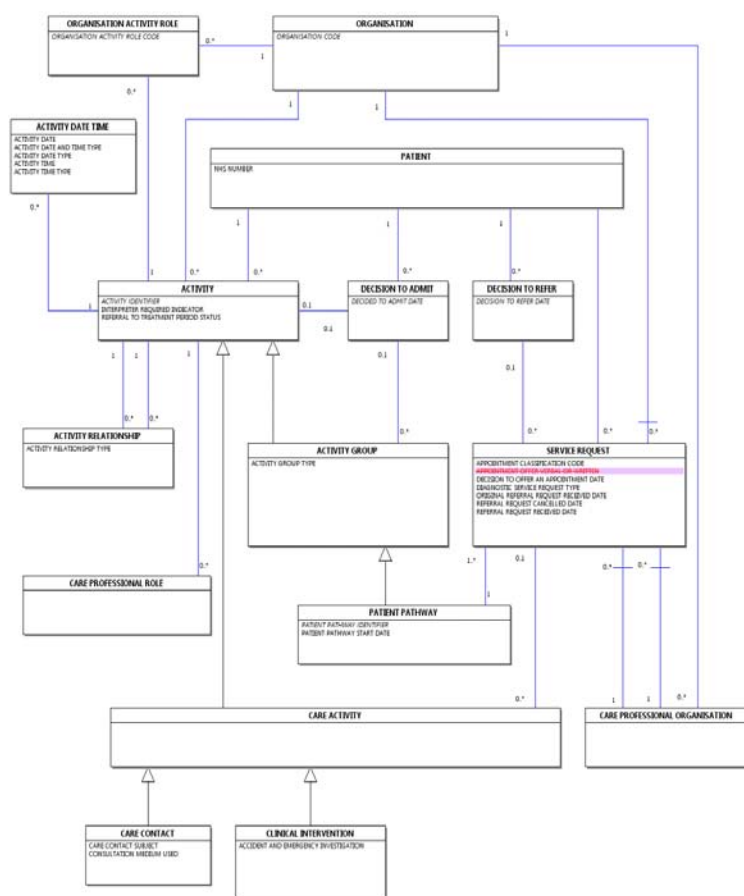


Change to Diagram: Changed Diagram



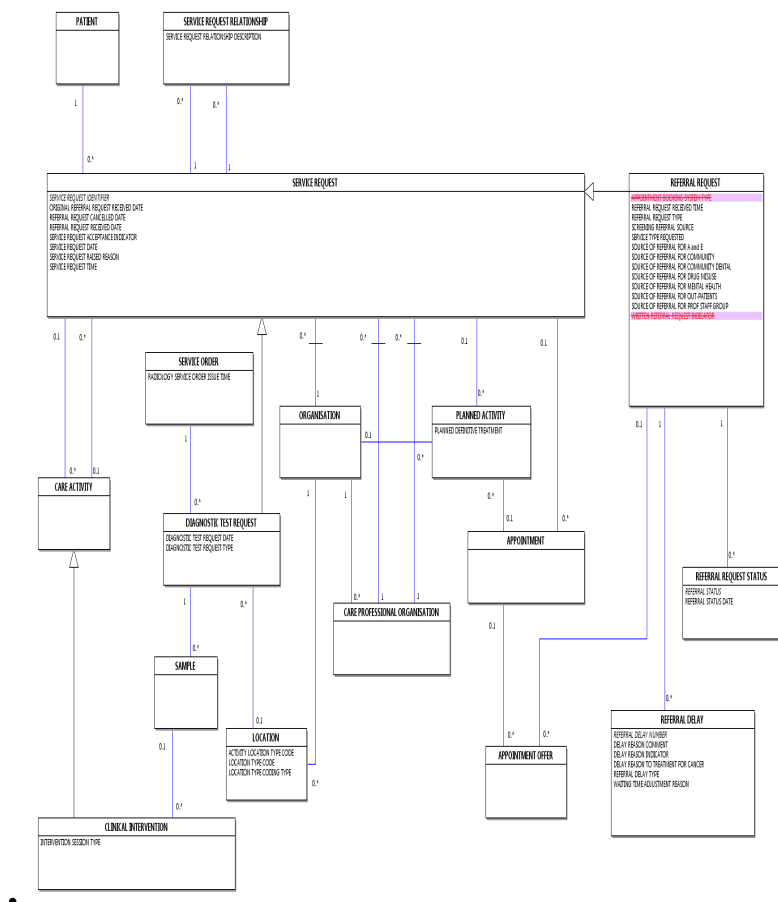
## PATIENT PATHWAY DIAGRAM

Change to Diagram: Changed Diagram



## REFERRAL REQUEST DIAGRAM

Change to Diagram: Changed Diagram



## ADMITTED PATIENT FLOWS DATA SET (RETIRED) renamed from ADMITTED PATIENT FLOWS DATA SET

Change to Data Set: Changed status to Retired, Name, Description

[Admitted Patient Flows Data Set Overview](#) This item has been retired from the NHS Data Model and Dictionary.

This replaces Kerner Returns KH06 and KH07. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

The [Department of Health](#) and [Strategic Health Authorities](#) require summary details from care providers of admitted patient admission activity flows. This central information requirement provides performance management measures of waiting times and helps to identify those [ORGANISATIONS](#) failing to meet the standards of the NHS Plan. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

The [Admitted Patient Flows Data Set](#) is provider or commissioner based depending upon the [ORGANISATION](#) submitting the data set. Providers are care [ORGANISATIONS](#) providing admitted patient care and treatment for NHS [PATIENTS](#). Commissioners are the [ORGANISATIONS](#) commissioning admitted patient care for NHS [PATIENTS](#).

The [Admitted Patient Flows Data Set](#) contains the admission [ACTIVITY](#) for the specified [REPORTING PERIOD](#).

Data Set Data Elements
Organisation and Reporting Period
<a href="#">COMMISSIONER OR PROVIDER STATUS INDICATOR</a>
<a href="#">ORGANISATION CODE (CODE OF COMMISSIONER)</a>
<a href="#">ORGANISATION CODE (CODE OF PROVIDER)</a>
<a href="#">REPORTING PERIOD START DATE</a>
<a href="#">REPORTING PERIOD END DATE</a>
<a href="#">DATA SET PREPARATION DATE</a>
<a href="#">DATA SET PREPARATION TIME</a>
Admitted Patient Flow Group by Main Specialty
To carry the flow details for the MAIN SPECIALTY CODE recorded.
Where no flow activity for a MAIN SPECIALTY CODE has occurred within the Reporting Period then no Admitted Patient Flow group should be recorded for it.
There should be only 1 occurrence of this sub group permitted per MAIN SPECIALTY CODE.
<a href="#">MAIN SPECIALTY CODE</a>

<a href="#">DECISIONS TO ADMIT (DAY CASE)</a>
<a href="#">PATIENTS ADMITTED (DAY CASE)</a>
<a href="#">PATIENTS FAILED TO ATTEND (DAY CASE)</a>
<a href="#">REMOVALS OTHER THAN ADMISSION (DAY CASE)</a>
<a href="#">DECISIONS TO ADMIT (ORDINARY)</a>
<a href="#">PATIENTS ADMITTED (ORDINARY)</a>
<a href="#">PATIENTS FAILED TO ATTEND (ORDINARY)</a>
<a href="#">REMOVALS OTHER THAN ADMISSION (ORDINARY)</a>
<a href="#">DEFERRED ADMISSIONS (ORDINARY)</a>
<a href="#">DEFERRED ADMISSIONS (DAY CASE)</a>
<a href="#">PATIENTS SUSPENDED (ORDINARY)</a>
<a href="#">PATIENTS SUSPENDED (DAY CASE)</a>

## ADMITTED PATIENT FLOWS DATA SET (RETIRED)\_ renamed from ADMITTED PATIENT FLOWS DATA SET

Change to Data Set: Changed status to Retired, Name, Description

- Retired Admitted Patient Flows Data Set
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Data\_Sets.Admitted\_Patient\_Flows\_Data\_Set to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.Admitted\_Patient\_Flows\_Data\_Set
- Changed Description

## ADMITTED PATIENT STOCKS DATA SET (RETIRED)\_ renamed from ADMITTED PATIENT STOCKS DATA SET

Change to Data Set: Changed status to Retired, Name, Description

[Admitted Patient Stocks Data Set Overview](#) This item has been retired from the NHS Data Model and Dictionary.

This replaces the Kerner Return KH07. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

The [Department of Health](#) and [Strategic Health Authorities](#) require summary details from care providers of admitted patient day case and ordinary admission stocks. This central information requirement provides performance management measures of waiting times and helps to identify those [ORGANISATIONS](#) failing to meet the standards of the NHS Plan. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

The [Admitted Patient Stocks Data Set](#) is provider or commissioner-based depending upon the Organisation submitting the data set. Providers are care [ORGANISATIONS](#) providing in-patient care and treatment for NHS [PATIENTS](#). Commissioners are the [ORGANISATIONS](#) commissioning in-patient care for NHS [PATIENTS](#).

The [Admitted Patient Stocks Data Set](#) contains the in-patient waiting to be admitted stocks as at the end of the specified [REPORTING PERIOD](#).

Data Set Data Elements
Organisation and Reporting Period
<a href="#">COMMISSIONER OR PROVIDER STATUS INDICATOR</a>
<a href="#">ORGANISATION CODE (CODE OF COMMISSIONER)</a>
<a href="#">ORGANISATION CODE (CODE OF PROVIDER)</a>
<a href="#">REPORTING PERIOD START DATE</a>
<a href="#">REPORTING PERIOD END DATE</a>
<a href="#">DATA SET PREPARATION DATE</a>
<a href="#">DATA SET PREPARATION TIME</a>
Admitted Patient Stock Group for Main Specialty: To carry the stock details for the Main Specialty Code and Intended Management recorded: Where there are no stocks present in the Reporting Period for all the sub-groups for the MAIN SPECIALTY CODE and the INTENDED MANAGEMENT then no Admitted Patient Stock Group should be recorded for it:
<a href="#">MAIN SPECIALTY CODE</a>
<a href="#">WAITING FOR ADMISSION INTENDED MANAGEMENT</a>
Admitted Patient Stock Group: To carry the sub group stock details for ordinary or day case admissions for the MAIN SPECIALTY CODE recorded: Where no stocks are present in the Reporting Period then zero values should be recorded: There should be 1 occurrence of this sub group permitted for each PATIENTS WAITING FOR ADMISSION TIME BAND per MAIN SPECIALTY CODE:
<a href="#">PATIENTS WAITING FOR ADMISSION TIME BAND</a>
<a href="#">PATIENTS WAITING FOR ADMISSION</a>
Admitted Patient Stock Group: To carry the sub group stock details for ordinary or day case admissions for the MAIN SPECIALTY CODE recorded: Where no stocks are present in the Reporting Period then zero values should be recorded: There should be 1 occurrence of this sub group permitted per MAIN SPECIALTY CODE:
<a href="#">DEFERRED ADMISSIONS (ORDINARY)</a>
<a href="#">PATIENTS SUSPENDED (ORDINARY)</a>
Summarised Admitted Patient Intended Procedure Stock Group: To carry the sub group stock details for waiting for admissions for the WAITING FOR ADMISSION INTENDED PROCEDURE: Where no stocks are present in the Reporting Period then zero values should be recorded: There should be 1 occurrence of this group permitted for ordinary admissions for each intended procedure and for each PATIENTS WAITING FOR ADMISSION TIME BAND:
<a href="#">ADMISSION INTENDED PROCEDURE</a>
<a href="#">PATIENTS WAITING FOR ADMISSION TIME BAND</a>
<a href="#">PATIENTS WAITING FOR ADMISSION</a>

## ADMITTED PATIENT STOCKS DATA SET (RETIRED)\_ renamed from ADMITTED PATIENT STOCKS DATA SET

Change to Data Set: Changed status to Retired, Name, Description

- Retired Admitted Patient Stocks Data Set
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Data\_Sets.Admitted\_Patient\_Stocks\_Data\_Set to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.Admitted\_Patient\_Stocks\_Data\_Set
- Changed Description

## BOOKINGS ADMITTED PATIENT AND OUT-PATIENT PROVIDER DATA SET (RETIRED)\_ renamed from BOOKINGS ADMITTED PATIENT AND OUT-PATIENT PROVIDER DATA SET

Change to Data Set: Changed status to Retired, Name, Description

[Bookings Admitted Patient and Out-Patient Provider Data Set Overview](#) This item has been retired from the NHS Data Model and Dictionary.

The [Department of Health](#) and [Strategic Health Authorities](#) requires information to help monitor national [WAITING LIST](#) trends. These are used to develop policies and indicate changes which can enable [WAITING LISTS](#) to be managed more effectively. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

The [Bookings Admitted Patient and Out-Patient Provider Data Set](#) is provider based. Providers are care [ORGANISATIONS](#) providing out-patient care and treatment for NHS [PATIENTS](#). Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

The [Bookings Admitted Patient and Out-Patient Provider Data Set](#) contains the out-patient [ACTIVITY](#) for the specified [REPORTING PERIOD](#).

Data Set Data Elements
Organisation and Reporting Period
<a href="#">ORGANISATION CODE (CODE OF PROVIDER)</a>
<a href="#">REPORTING PERIOD START DATE</a>
<a href="#">REPORTING PERIOD END DATE</a>
<a href="#">DATA SET PREPARATION DATE</a>
<a href="#">DATA SET PREPARATION TIME</a>
Admitted Patient Booking
<a href="#">DECISIONS TO ADMIT (DAY CASE)</a>
<a href="#">DECISIONS TO ADMIT (ORDINARY)</a>
<a href="#">DECISIONS TO ADMIT (BOOKED DAY CASE)</a>
<a href="#">DECISIONS TO ADMIT (BOOKED ORDINARY)</a>
Out-Patient Booking
<a href="#">GP WRITTEN REFERRALS BOOKED</a>
<a href="#">GP WRITTEN REFERRALS MADE</a>

## BOOKINGS ADMITTED PATIENT AND OUT-PATIENT PROVIDER DATA SET (RETIRED)\_ renamed from BOOKINGS ADMITTED PATIENT AND OUT-PATIENT PROVIDER DATA SET

Change to Data Set: Changed status to Retired, Name, Description

- Retired Bookings Admitted Patient and Out-Patient Provider Data Set
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Data\_Sets.Bookings\_Admitted\_Patient\_and\_Out-Patient\_Provider\_Data\_Set to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.Bookings\_Admitted\_Patient\_and\_Out-Patient\_Provider\_Data\_Set
- Changed Description

## CHOOSE AND BOOK UTILISATION COMMISSIONER DATA SET (RETIRED)\_ renamed from CHOOSE AND BOOK UTILISATION COMMISSIONER DATA SET

Change to Data Set: Changed status to Retired, Name, Description

[Choose and Book Utilisation Commissioner Data Set Overview](#) This item has been retired from the NHS Data Model and Dictionary.

The [Department of Health](#) requires information to help monitor utilisation of the [Choose and Book](#) system. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

The [Choose and Book Utilisation Commissioner Data Set](#) is commissioner based. Commissioners are the [ORGANISATIONS](#) commissioning out-patient and in-patient care for NHS [PATIENTS](#). Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

The [Choose and Book Utilisation Commissioner Data Set](#) contains the out-patient booking activity for the specified [REPORTING PERIOD](#).

Data Set Data Elements
Organisation and Reporting Period
<a href="#">ORGANISATION CODE (CODE OF COMMISSIONER)</a>
<a href="#">REPORTING PERIOD START DATE</a>
<a href="#">REPORTING PERIOD END DATE</a>
<a href="#">DATA SET PREPARATION DATE</a>
<a href="#">DATA SET PREPARATION TIME</a>
Choose and Book Utilisation
<a href="#">NUMBER OF OUT-PATIENT CONVERTED UNIQUE BOOKING REFERENCE NUMBERS</a>
<a href="#">GP WRITTEN REFERRALS MADE</a>

## CHOOSE AND BOOK UTILISATION COMMISSIONER DATA SET (RETIRED)\_ renamed from CHOOSE AND BOOK UTILISATION

## COMMISSIONER DATA SET

Change to Data Set: Changed status to Retired, Name, Description

- Retired Choose and Book Utilisation Commissioner Data Set
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Data\_Sets.Choose\_and\_Book\_Utilisation\_Commissioner\_Data\_Set to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.Choose\_and\_Book\_Utilisation\_Commissioner\_Data\_Set
- Changed Description

## NATIONAL DIRECT ACCESS AUDIOLOGY PATIENT TRACKING LIST DATA SET (RETIRED)\_ renamed from NATIONAL DIRECT ACCESS AUDIOLOGY PATIENT TRACKING LIST DATA SET

Change to Data Set: Changed status to Retired, Name, Description

[National Direct Access Audiology Patient Tracking List Data Set Overview](#) This item has been retired from the NHS Data Model and Dictionary.

Data Set Data Elements
Organisation and Reporting Period
<a href="#">REPORTING PERIOD START DATE</a>
<a href="#">REPORTING PERIOD END DATE</a>
<a href="#">ORGANISATION CODE (CODE OF PROVIDER)</a>
<a href="#">ORGANISATION CODE (CODE OF COMMISSIONER)</a>
Part 1A - Untreated Patients who do not have a future APPOINTMENT:
<a href="#">REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS TIME BAND</a>
<a href="#">REFERRAL TO TREATMENT PERIOD INCOMPLETE WITHIN TIME BAND (NON-ADMITTED PATIENTS)</a>
Part 1B - Untreated Patients whose REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE has passed:
<a href="#">REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED IN LAST 7 DAYS</a>
<a href="#">REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED TOTAL</a>
Part 2 - Patients whose REFERRAL TO TREATMENT PERIOD completed in the last week:
<a href="#">REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (UNKNOWN START DATE)</a>
<a href="#">REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (WITHIN 18 WEEKS)</a>
<a href="#">REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (NOT WITHIN 18 WEEKS)</a>

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## NATIONAL DIRECT ACCESS AUDIOLOGY PATIENT TRACKING LIST DATA SET (RETIRED)\_ renamed from NATIONAL DIRECT ACCESS AUDIOLOGY PATIENT TRACKING LIST DATA SET

Change to Data Set: Changed status to Retired, Name, Description

- Retired National Direct Access Audiology Patient Tracking List Data Set
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Data\_Sets.National\_Direct\_Access\_Audiology\_Patient\_Tracking\_List\_Data\_Set to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.National\_Direct\_Access\_Audiology\_Patient\_Tracking\_List\_Data\_Set
- Changed Description

## OUT-PATIENT FLOWS DATA SET (RETIRED)\_ renamed from OUT-PATIENT FLOWS DATA SET

Change to Data Set: Changed status to Retired, Name, Description

[Out-Patient Flows Data Set Overview](#) This item has been retired from the NHS Data Model and Dictionary.

This replaces the Kerner Returns KH09, QM00 and QM0P. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

The [Department of Health](#) and [Strategic Health Authorities](#) require summary details from care providers of consultant out-patient activity flows. This central information requirement provides performance management measures of waiting times and helps to identify those organisations failing to meet the standards of the NHS Plan. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

The [Out-Patient Flows Data Set](#) is provider or commissioner based depending upon the [ORGANISATION](#) submitting the data set. Providers are care [ORGANISATIONS](#) providing out-patient care and treatment for NHS [PATIENTS](#). Commissioners are the [ORGANISATIONS](#) commissioning consultant out-patient care for NHS [PATIENTS](#). For commissioner based data sets, the provider is required to supply data to the commissioner.

The [Out-Patient Flows Data Set](#) contains the consultant out-patient [ACTIVITY](#) for the specified [REPORTING PERIOD](#).

Data Set Data Elements
Organisation and Reporting Period
<a href="#">COMMISSIONER OR PROVIDER STATUS INDICATOR</a>
<a href="#">ORGANISATION CODE (CODE OF COMMISSIONER)</a>
<a href="#">ORGANISATION CODE (CODE OF PROVIDER)</a>
<a href="#">REPORTING PERIOD START DATE</a>
<a href="#">REPORTING PERIOD END DATE</a>
<a href="#">DATA SET PREPARATION DATE</a>
<a href="#">DATA SET PREPARATION TIME</a>
Out-Patient Flow Group by Main Speciality:



To carry the flow details for the MAIN SPECIALTY CODE recorded. Where no flow activity for a MAIN SPECIALTY CODE has occurred within the Reporting Period then no Out-Patient Flow group should be recorded for it. There should be only 1 occurrence of this sub group permitted per MAIN SPECIALTY CODE.
<a href="#">MAIN SPECIALTY CODE</a>
<a href="#">OP WRITTEN REFERRALS</a>
<a href="#">OUT-PATIENT FIRST APPOINTMENTS FIRST ATTENDANCES SEEN</a>
<a href="#">OUT-PATIENT FIRST APPOINTMENTS DID NOT ATTEND</a>
<a href="#">OUT-PATIENT FOLLOW-UP APPOINTMENTS ATTENDANCES SEEN</a>
<a href="#">OUT-PATIENT FOLLOW-UP APPOINTMENTS DID NOT ATTEND</a>
<a href="#">OTHER REFERRALS</a>
Out-Patient Effective Waits Group by Period within Main Specialty: To carry the effective wait details for the MAIN SPECIALTY CODE recorded. There should be 1 occurrence of this sub group permitted for each Out-Patient waiting time band for each MAIN SPECIALTY CODE.
<a href="#">MAIN SPECIALTY CODE</a>
<a href="#">OUT-PATIENT WAITING TIME BAND</a>
<a href="#">OUT-PATIENT EFFECTIVE WAITS</a>

## OUT-PATIENT FLOWS DATA SET (RETIRED) renamed from OUT-PATIENT FLOWS DATA SET

Change to Data Set: Changed status to Retired, Name, Description

- Retired Out-Patient Flows Data Set
- Changed Name from Data.Dictionary.Messages.Central\_Return\_Data\_Sets.Data\_Sets.Out-Patient\_Flows\_Data\_Set to Retired.Data.Dictionary.Messages.Central\_Returns\_Data\_Sets.Out-Patient\_Flows\_Data\_Set
- Changed Description

## OUT-PATIENT STOCKS DATA SET (RETIRED) renamed from OUT-PATIENT STOCKS DATA SET

Change to Data Set: Changed status to Retired, Name, Description

[Out-Patient Stocks Data Set Overview](#) This item has been retired from the NHS Data Model and Dictionary.

This replaces the [Korner Returns QM00 Not Seens](#). The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

The [Department of Health](#) and [Strategic Health Authorities](#) require summary details from care providers of consultant out-patient activity flows. This central information requirement provides performance management measures of waiting times and helps to identify those organisations failing to meet the standards of the NHS Plan. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

The [Out-Patient Stocks Data Set](#) is provider or commissioner based depending upon the [ORGANISATION](#) submitting the data set. Providers are care [ORGANISATIONS](#) providing consultant out-patient care and treatment for NHS [PATIENTS](#). Commissioners are the [ORGANISATIONS](#) commissioning out-patient care for NHS [PATIENTS](#). For commissioner based data sets, the provider is required to supply data to the commissioner.

The [Out-Patient Stocks Data Set](#) contains the not yet seen consultant out-patient stocks as at the end of the specified [REPORTING PERIOD](#).

Data Set Data Elements
Organisation and Reporting Period
<a href="#">COMMISSIONER OR PROVIDER STATUS INDICATOR</a>
<a href="#">ORGANISATION CODE (CODE OF COMMISSIONER)</a>
<a href="#">ORGANISATION CODE (CODE OF PROVIDER)</a>
<a href="#">REPORTING PERIOD START DATE</a>
<a href="#">REPORTING PERIOD END DATE</a>
<a href="#">DATA SET PREPARATION DATE</a>
<a href="#">DATA SET PREPARATION TIME</a>
Out-Patient Stock Group by Main Specialty: To carry the stock details for the MAIN SPECIALTY CODE recorded. Where there are no stocks present for a MAIN SPECIALTY CODE within the Reporting Period then no Out-Patient Stock group should be recorded for it. There should be 1 occurrence of this sub group permitted for each Out-Patients Waiting Time Band for each MAIN SPECIALTY CODE.
<a href="#">MAIN SPECIALTY CODE</a>
<a href="#">OUT-PATIENT WAITING TIME BAND</a>
<a href="#">OUT-PATIENTS WAITING</a>

## OUT-PATIENT STOCKS DATA SET (RETIRED) renamed from OUT-PATIENT STOCKS DATA SET

Change to Data Set: Changed status to Retired, Name, Description

- Retired Out-Patient Stocks Data Set
- Changed Name from Data.Dictionary.Messages.Central\_Return\_Data\_Sets.Data\_Sets.Out-Patient\_Stocks\_Data\_Set to Retired.Data.Dictionary.Messages.Central\_Returns\_Data\_Sets.Out-Patient\_Stocks\_Data\_Set
- Changed Description

## SUMMARISED ACTIVITY FLOWS DATA SET (RETIRED) renamed from SUMMARISED ACTIVITY FLOWS DATA SET

Change to Data Set: Changed status to Retired, Name, Description

[Summarised Activity Flows Data Set Overview](#) This item has been retired from the NHS Data Model and Dictionary.

The [Department of Health](#) and [Strategic Health Authorities](#) require summary details from care providers of in-patient and out-patient activity flows. This central information requirement provides performance management measures of waiting times and helps to identify those [ORGANISATIONS](#) failing to meet the standards of the NHS Plan. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

The [Summarised Activity Flows Data Set](#) is provider or commissioner based depending upon the [ORGANISATION](#) submitting the data set. Providers are care [ORGANISATIONS](#) providing in-patient care and treatment for NHS [PATIENTS](#). Commissioners are the [ORGANISATIONS](#) commissioning in-patient care for NHS [PATIENTS](#). For commissioner based data sets, the provider is required to supply data to the commissioner. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

The [Summarised Activity Flows Data Set](#) contains the in-patient and out-patient flow [ACTIVITY](#) as at the end of the specified [REPORTING PERIOD](#).

Data Set Data Elements
<b>Organisation and Reporting Period</b>
<a href="#">COMMISSIONER OR PROVIDER STATUS INDICATOR</a>
<a href="#">ORGANISATION CODE (CODE OF COMMISSIONER)</a>
<a href="#">ORGANISATION CODE (CODE OF PROVIDER)</a>
<a href="#">REPORTING PERIOD START DATE</a>
<a href="#">REPORTING PERIOD END DATE</a>
<a href="#">DATA SET PREPARATION DATE</a>
<a href="#">DATA SET PREPARATION TIME</a>
<b>Admitted Patient Flow All Elective Admissions:</b> To carry the flow details for admissions from the Elective Admission List:
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (ORDINARY)</a>
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (DAY CASE)</a>
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (PLANNED)</a>
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (NHS TREATMENT CENTRES)</a>
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (IS TREATMENT CENTRES)</a>
<b>Admitted Patient Flow for Trauma &amp; Orthopaedics Elective Admissions Only:</b> To carry the in-patient flow details for all admissions from the Elective Admission List for MAIN SPECIALTY CODE 110 TRAUMA & ORTHOPAEDICS only. Where no stocks are present, zero should be recorded:
<a href="#">MAIN SPECIALTY CODE</a> (Main Specialty Code 110)
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (ORDINARY)</a>
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (DAY CASE)</a>
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (PLANNED)</a>
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (NHS TREATMENT CENTRES)</a>
<a href="#">ADMITTED PATIENT ELECTIVE ADMISSIONS (IS TREATMENT CENTRES)</a>
<b>Admitted Patient Flows Admissions NHS Hospitals:</b> To carry the flow details for admissions to a NHS Hospital
<a href="#">ADMITTED PATIENT TOTAL NON-ELECTIVE ADMISSIONS</a>
<b>Admitted Patient Flows Admissions NHS Hospitals:</b> To carry the flow details for admissions to a NHS Hospital for particular intended procedures
<a href="#">ADMISSION INTENDED PROCEDURE</a>
<a href="#">ADMITTED PATIENT NHS ADMISSIONS</a>
<b>Admitted Patient Flow Admissions non-NHS Hospitals:</b> To carry the flow details for admissions for NHS patient admitted to a non-NHS Hospital:
<a href="#">ADMISSION INTENDED PROCEDURE</a>
<a href="#">ADMITTED PATIENT NON-NHS ADMISSIONS</a>
<b>Out-Patient Flow GP Written Referrals:</b> To carry the flow details for GP written referrals made and patients seen resulting from a GP written referral:
<a href="#">GP WRITTEN REFERRALS</a>
<a href="#">GP WRITTEN REFERRALS SEEN</a>
<b>Out-Patient Flow GP Written Referrals Trauma &amp; Orthopaedics:</b> To carry the flow details for all GP written referrals made and patients seen resulting from a GP written referral to a CONSULTANT for MAIN SPECIALTY CODE 110 TRAUMA & ORTHOPAEDICS. Where no stocks are present, zero should be recorded:
<a href="#">MAIN SPECIALTY CODE</a> (Main Specialty Code 110)
<a href="#">GP WRITTEN REFERRALS</a>
<a href="#">GP WRITTEN REFERRALS SEEN</a>

## SUMMARISED ACTIVITY FLOWS DATA SET (RETIRED), renamed from SUMMARISED ACTIVITY FLOWS DATA SET

Change to Data Set: Changed status to Retired, Name, Description

- Retired Summarised Activity Flows Data Set
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Data\_Sets.Summarised\_Activity\_Flows\_Data\_Set to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.Summarised\_Activity\_Flows\_Data\_Set
- Changed Description

## SUMMARISED STOCKS DATA SET (RETIRED), renamed from SUMMARISED STOCKS DATA SET

Change to Data Set: Changed status to Retired, Name, Description

[Summarised Stocks Data Set Overview](#) This item has been retired from the NHS Data Model and Dictionary.

The [Department of Health](#) and [Strategic Health Authorities](#) require summary details from care providers of admitted patient and out-patient stocks for Trauma and

Orthopaedics, and in-patient stocks for ordinary admissions for care procedures of CABG, PTCA, Valves and Angiography. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

This central information requirement provides performance management measures of waiting times and helps to identify those [ORGANISATIONS](#) failing to meet the standards of the NHS Plan. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

The [Summarised Stocks Data Set](#) is provider or commissioner based depending upon the [ORGANISATION](#) submitting the data set. Providers are care [ORGANISATIONS](#) providing admitted patient care and treatment for NHS [PATIENTS](#). Commissioners are the [ORGANISATIONS](#) commissioning in-patient care for NHS [PATIENTS](#). For commissioner based data sets, the provider is required to supply data to the commissioner.

The [Summarised Stocks Data Set](#) contains the admitted [PATIENT](#) waiting to be admitted stocks as at the end of the specified [REPORTING PERIOD](#).

Data Set Data Elements
Organisation and Reporting Period
<a href="#">COMMISSIONER OR PROVIDER STATUS INDICATOR</a>
<a href="#">ORGANISATION CODE (CODE OF COMMISSIONER)</a>
<a href="#">ORGANISATION CODE (CODE OF PROVIDER)</a>
<a href="#">REPORTING PERIOD START DATE</a>
<a href="#">REPORTING PERIOD END DATE</a>
<a href="#">DATA SET PREPARATION DATE</a>
<a href="#">DATA SET PREPARATION TIME</a>
Admitted Patient Stock Group for Specialties
To carry the in-patient stock details for a MAIN SPECIALTY CODE. Where no stocks are present, zero should be recorded. There should be 1 occurrence of this group for each PATIENTS WAITING FOR ADMISSION TIME BANDS for each MAIN SPECIALTY CODE
<a href="#">MAIN SPECIALTY CODE</a>
<a href="#">WAITING FOR ADMISSION INTENDED MANAGEMENT</a>
<a href="#">PATIENTS WAITING FOR ADMISSION TIME BAND</a>
<a href="#">PATIENTS WAITING FOR ADMISSION</a>
Summarised Admitted Patient Stock Group for particular intended procedures for ordinary admissions:
To carry the sub-group stock details for ordinary admissions for the INTENDED PROCEDURE. Where no stocks are present in the Reporting Period then zero values should be recorded. There should only be 1 occurrence of this group permitted for each PATIENTS WAITING FOR ADMISSION TIME BAND for ordinary admissions for each INTENDED PROCEDURE.
<a href="#">ADMISSION INTENDED PROCEDURE</a>
<a href="#">WAITING FOR ADMISSION INTENDED MANAGEMENT</a>
<a href="#">PATIENTS WAITING FOR ADMISSION TIME BAND</a>
<a href="#">PATIENTS WAITING FOR ADMISSION</a>
Out-Patient Stock Group
To carry the out-patient stock details for MAIN SPECIALTY CODE. Where no stocks are present, zero should be recorded. There should be 1 occurrence of this sub-group permitted for each OUT-PATIENT WAITING TIME BAND for each MAIN SPECIALTY CODE.
<a href="#">MAIN SPECIALTY CODE</a>
<a href="#">OUT-PATIENT WAITING TIME BAND</a>
<a href="#">OUT-PATIENTS WAITING</a>

## SUMMARISED STOCKS DATA SET (RETIRED)\_ renamed from SUMMARISED STOCKS DATA SET

Change to Data Set: Changed status to Retired, Name, Description

- Retired Summarised Stocks Data Set
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Data\_Sets.Summarised\_Stocks\_Data\_Set to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.Summarised\_Stocks\_Data\_Set
- Changed Description

## ADMITTED PATIENT EFFECTIVE WAITING TIME CALCULATION (RETIRED)\_ renamed from ADMITTED PATIENT EFFECTIVE WAITING TIME CALCULATION

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

For collection of information on Admitted Patient Waiting Times, the period of waiting for each [PATIENT](#) expressed as completed weeks waiting is required to be calculated in order to determine the appropriate waiting time band the [PATIENT](#) should be counted within. This item has been retired from the NHS Data Model and Dictionary.

The start point of the waiting period calculation is the [ELECTIVE ADMISSION EFFECTIVE WAIT START DATE](#) which takes into consideration any [PATIENT](#) instigated resets. The end point is the [REPORTING PERIOD END DATE](#). Once the period of wait has been calculated from these two dates in days, the result is also adjusted for any periods of suspension. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

The collection of information may be retrospective and therefore any [PATIENT](#) where the [ELECTIVE ADMISSION EFFECTIVE WAIT START DATE](#) is after [REPORTING PERIOD END DATE](#) should be excluded from the count as they are outside the date boundaries of the collection. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

### Patients waiting for admission

When an [ELECTIVE ADMISSION LIST ENTRY](#) is made for a [PATIENT](#) following a [DECISION TO ADMIT](#) and the [PATIENT](#) accepts an [OFFERED FOR ADMISSION DATE](#) of an [OFFER OF ADMISSION](#), it is this offered date that the [PATIENT](#) is expected to attend and be admitted. [ADMISSION OFFER OUTCOME](#) records whether or not the [PATIENT](#) was admitted and the circumstances that applied.

The [ELECTIVE ADMISSION LIST ENTRY](#) is removed from the [ELECTIVE ADMISSION LIST](#) when the [PATIENT](#) is admitted or removed for other specified reasons. [ELECTIVE ADMISSION LIST REMOVAL REASON](#) records the method of removal from the list and [ELECTIVE ADMISSION LIST REMOVAL DATE](#) records the removal date.

Once removed from the [ELECTIVE ADMISSION LIST](#), the [PATIENT](#) ceases to be waiting for admission and all associated [OFFERS OF ADMISSION](#) become inactive:

The waiting time band the [PATIENT](#) is counted within is calculated from the [ELECTIVE ADMISSION EFFECTIVE WAIT START DATE](#) to the [REPORTING PERIOD END DATE](#). The [ELECTIVE ADMISSION EFFECTIVE WAIT START DATE](#) is an adjusted date which takes into consideration the effect on waiting time calculations of [Self-Deferred Admission](#):

Periods of suspension which are within the waiting period are also deducted to arrive at the appropriate waiting time band for the [PATIENT](#) to be counted within. See [Suspended Patient](#):

[ADMISSION OFFER OUTCOME](#) records whether or not the [PATIENT](#) was admitted and the circumstances that applied and for cancellations, the date of cancellation is recorded by the [OFFER OF ADMISSION](#) cancellation date:

If the [ELECTIVE ADMISSION EFFECTIVE WAIT START DATE](#) is after the [REPORTING PERIOD END DATE](#) then no waiting time should be calculated and the [PATIENT](#) should be excluded from the count as they are outside the date boundaries of the collection:

#### Calculation of total suspension days

If the [PATIENT](#) has been suspended at all during the waiting time period, the period(s) of suspension should be calculated and summed to calculate the total suspension days which will then be deducted from the adjusted calculated days:

However, if the [PATIENT](#) is still suspended as at the [REPORTING PERIOD END DATE](#) they are excluded from Admitted Patient Stocks counts and no calculation of any periods of suspension is required:

#### Waiting time bands

The number of days waiting calculated excluding any suspension or self-deferred periods are divided by 7 to give the number of weeks waiting. Where the resultant number is less than 1, the Waiting Time Band is less than 1 week:

For example,

A [PATIENT](#) has an [ORIGINAL DECIDED TO ADMIT DATE](#) of 4/8/2005:

The hospital offers an admission for 5/9/2005 which the [PATIENT](#) accepts:

On the day of the admission the [PATIENT](#) has to cancel the admission and so his [ELECTIVE ADMISSION EFFECTIVE WAIT START DATE](#) is set to 5/9/2005 (the admission date that was cancelled):

The [PATIENT](#) then informs the hospital that he is on holiday for 3 weeks and so cannot come into hospital between 13/9/2005 and 3/10/2005 inclusive so the [PATIENT](#) is suspended for that period:

The [PATIENT](#) is given an [OFFERED FOR ADMISSION DATE](#) of 12/10/2005. This is accepted by the [PATIENT](#) and the [PATIENT](#) is admitted:

So the number of days the [PATIENT](#) was waiting is 37 days (from [ELECTIVE ADMISSION EFFECTIVE WAIT START DATE](#) to the day before the [OFFERED FOR ADMISSION DATE](#)). The number of days in the suspended period (21 days) is then subtracted from waiting period of 37, which leaves 16 days. This is divided by 7 to give the actual period of weeks waiting as more than 2 weeks and less than 3 weeks:

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## ADMITTED PATIENT EFFECTIVE WAITING TIME CALCULATION (RETIRED)\_ renamed from ADMITTED PATIENT EFFECTIVE WAITING TIME CALCULATION

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

- Retired Admitted Patient Effective Waiting Time Calculation
- Changed Name from Data\_Dictionary.NHS\_Business\_Definitions.A.Admitted\_Patient\_Effective\_Waiting\_Time\_Calculation to Retired.Data\_Dictionary.NHS\_Business\_Definitions.A.Admitted\_Patient\_Effective\_Waiting\_Time\_Calculation
- Changed Description

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## ADMITTED PATIENT FLOWS DATA SET OVERVIEW (RETIRED)\_ renamed from ADMITTED PATIENT FLOWS DATA SET OVERVIEW

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

### Events During the Reporting Period

- The [Department of Health](#) requires performance management information on [ELECTIVE ADMISSION LIST](#) events within a specified [REPORTING PERIOD](#):
- The [Department of Health](#) uses the information to help monitor national [WAITING LIST](#) trends. These are used to develop policies and indicate changes which can enable the [WAITING LISTS](#) to be managed more effectively:
- This central information collection requirement is both:

provider based and is submitted by provider [NHS Trust](#) and provider [Primary Care Trusts](#) regardless of where [PATIENTS](#) live:

and

commissioner based and is the aggregation of commissioned [PATIENT](#) activity delivered by provider [NHS Trusts](#) and provider [Primary Care Trusts](#):

Each submission will be from one [ORGANISATION](#) in the role of provider or commissioner and should only contain data appropriate to that role i.e. must not contain a mixture of commissioning and provider role data. This item has been retired from the NHS Data Model and

## Dictionary.

~~COMMISSIONER OR PROVIDER STATUS INDICATOR~~ indicates whether it is a submission from the ~~ORGANISATION~~ in the role of commissioner of care or provider of care. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

### Admitted Patient Flow Events

- The collection data is sub-grouped by ~~MAIN SPECIALTY CODE~~. Where no flow activity data for a ~~MAIN SPECIALTY CODE~~ has occurred within the ~~REPORTING PERIOD~~ then no admitted patient flow sub-group should be recorded for it. Only one sub-group is permitted per ~~MAIN SPECIALTY CODE~~.
- The collection is for:
  - all ~~PATIENTS~~ for whom a ~~DECISION TO ADMIT~~ was taken during the ~~REPORTING PERIOD~~ to place the patients on the ~~Elective Admission List~~;
  - and
  - all ~~PATIENTS~~ admitted during the ~~REPORTING PERIOD~~ from the ~~Elective Admission List~~;
  - and
  - all ~~PATIENTS~~ who giving no advance warning failed to attend for admission from the ~~Elective Admission List~~ during the ~~REPORTING PERIOD~~;
  - and
  - all ~~PATIENTS~~ who were removed from the ~~Elective Admission List~~ during the ~~REPORTING PERIOD~~ for reasons other than admission.
- It includes those ~~PATIENTS~~ who are classified as booked admissions and waiting list admissions, and is inclusive of private ~~PATIENTS~~ and ~~PATIENTS~~ who are ~~Overseas Visitors~~.
- It excludes those ~~PATIENTS~~ who are classified as planned admissions and ~~Suspended Patients~~.
- ~~ELECTIVE ADMISSION TYPE~~ records the classification of the admission.
- The collection is sub-divided into a count of day case admissions and ordinary admissions:
  - ~~INTENDED MANAGEMENT~~ records whether a ~~PATIENT~~ is intended as an ordinary admission (to stay overnight) or a day case admission (not to stay overnight).

### Data collection

- The NHS report data sets to the ~~Department of Health~~ monthly and quarterly via Unify2, an online data collection system. Trusts and ~~Primary Care Trusts~~ can either enter data directly onto Unify2, or upload from spreadsheets provided to ease data input.
- These returns flow through ~~Strategic Health Authorities~~, and require their sign off before they are accessed by the ~~Department of Health~~.
- Data providers are required to submit data by the 15th working day following the month end, with publication being on the Friday following the 20th working day after month end.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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### ADMITTED PATIENT FLOWS DATA SET OVERVIEW (RETIRED)\_ renamed from ADMITTED PATIENT FLOWS DATA SET OVERVIEW

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

- Retired Admitted Patient Flows Data Set Overview
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Overviews.Admitted\_Patient\_Flows\_Data\_Set\_Overview to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.Admitted\_Patient\_Flows\_Data\_Set\_Overview
- Changed Description

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### ADMITTED PATIENT STOCKS DATA SET OVERVIEW (RETIRED)\_ renamed from ADMITTED PATIENT STOCKS DATA SET OVERVIEW

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

### Admitted Patient Stocks at the end of the Reporting Period

- The ~~Department of Health~~ requires performance management information on ~~ELECTIVE ADMISSION LIST~~ stocks at the end of a specified ~~REPORTING PERIOD~~.
- The ~~Department of Health~~ uses the information to help monitor national ~~WAITING LIST~~ trends. These are used to develop policies and indicate changes which can enable the ~~WAITING LISTS~~ to be managed more effectively.
- This central information collection requirement is both:
  - provider based and is submitted by provider ~~NHS Trusts~~ and provider ~~Primary Care Trusts~~ regardless of where ~~PATIENTS~~ live;
  - and
  - commissioner based and is the aggregation of commissioned ~~PATIENT~~ activity delivered by provider ~~NHS Trusts~~ and provider ~~Primary Care Trusts~~;
- Each submission will be from one ~~ORGANISATION~~ in the role of provider or commissioner and should only contain data appropriate to that

role i.e. must not contain a mixture of commissioning and provider role data. This item has been retired from the NHS Data Model and Dictionary.

~~COMMISSIONER OR PROVIDER STATUS INDICATOR~~ indicates whether it is a submission from the ~~ORGANISATION~~ in the role of commissioner of care or provider of care. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

#### Admitted Patient Stock Group Main Specialty

- The collection data is grouped by ~~MAIN SPECIALTY CODE~~. Where there are no stocks present for a ~~MAIN SPECIALTY CODE~~ within the ~~REPORTING PERIOD~~ then no admitted patient stocks group should be recorded for it. Only one sub group is permitted per ~~MAIN SPECIALTY CODE~~.

#### Admitted Patient Stock Sub Group Ordinary Admissions and Day Case Admissions

- Within the ~~MAIN SPECIALTY CODE~~ grouping, the collection is further sub grouped by ~~WAITING FOR ADMISSION INTENDED MANAGEMENT~~ which indicates whether the sub group is for ordinary admissions or day case admissions

- The collection is for:

all ~~PATIENTS~~ who are waiting to be admitted from the ~~ELECTIVE ADMISSION LIST~~ on the ~~REPORTING PERIOD END DATE~~. This includes ~~PATIENTS~~ with an ~~OFFER OF ADMISSION MADE DATE~~ before or on the ~~REPORTING PERIOD END DATE~~.

and

all ~~PATIENTS~~ who are waiting to be admitted by specified waiting time band from the ~~ELECTIVE ADMISSION LIST~~ on the ~~REPORTING PERIOD END DATE~~. This includes ~~PATIENTS~~ with an ~~OFFER OF ADMISSION MADE DATE~~ before or on the ~~REPORTING PERIOD END DATE~~.

and

all ~~PATIENTS~~ who are waiting to be admitted from the ~~ELECTIVE ADMISSION LIST~~ on the ~~REPORTING PERIOD END DATE~~ due to Self-Deferred Admission. This includes ~~PATIENTS~~ with an ~~OFFER OF ADMISSION MADE DATE~~ before or on the ~~REPORTING PERIOD END DATE~~.

and

all ~~PATIENTS~~ who are waiting to be admitted from the ~~ELECTIVE ADMISSION LIST~~ who at the ~~REPORTING PERIOD END DATE~~ are ~~Suspended Patients~~. This includes ~~PATIENTS~~ with an ~~OFFER OF ADMISSION MADE DATE~~ before or on the ~~REPORTING PERIOD END DATE~~.

- It includes those ~~PATIENTS~~ who are classified as booked admissions and waiting list admissions, and is inclusive of private ~~PATIENTS~~ and ~~PATIENTS~~ who are ~~Overseas Visitors~~.

It excludes those ~~PATIENTS~~ who are classified as planned admissions and for the total number of ~~PATIENTS~~ waiting and waiting by time band also excludes ~~Suspended Patients~~.

~~ELECTIVE ADMISSION TYPE~~ records the classification of the admission:

The collection is further sub grouped into a count of day case admissions and ordinary admissions:

~~INTENDED MANAGEMENT~~ records whether a ~~PATIENT~~ is intended as an ordinary admission or a day case admission and therefore which ~~WAITING FOR ADMISSION INTENDED MANAGEMENT~~ it is being sub grouped within.

#### Summarised Admitted Patient Stock Group Intended Procedures for Ordinary Admissions

- The collection data is grouped by ~~ADMISSION INTENDED PROCEDURE~~ which indicates the required range of ~~OPERATIVE PROCEDURES~~. Where there are no stocks present for an ~~ADMISSION INTENDED PROCEDURE~~ within the ~~REPORTING PERIOD~~ then no in-patient stocks group should be recorded for it. Only one group is permitted per ~~ADMISSION INTENDED PROCEDURE~~.
- The required grouping ranges of ~~ADMISSION INTENDED PROCEDURE~~ are:

0001 CABG – K40-46 Coronary Artery Bypass Graft Code Range:

or

0002 PTCA – K49-50 Percutaneous Transluminal Operations Coding Range:

or

0003 Valves Coding Range K25-K35 & K36

or

0004 – Angiography Coding Range K63 & K65

- Within the ~~ADMISSION INTENDED PROCEDURE~~ the collection only applies to patients waiting for admission as ordinary admissions as indicated by ~~WAITING FOR ADMISSION INTENDED MANAGEMENT~~.

- The collection is for:

all ~~PATIENTS~~ for who have an ~~OFFER OF ADMISSION MADE DATE~~ before or on the ~~REPORTING PERIOD~~ and are waiting to be admitted from the ~~Elective Admission List~~

and

all ~~PATIENTS~~ for who have an ~~OFFER OF ADMISSION MADE DATE~~ before or on the ~~REPORTING PERIOD END DATE~~ and are waiting to be admitted by specified waiting time band from the ~~Elective Admission List~~

- It includes those ~~PATIENTS~~ who are classified as booked admissions and waiting list admissions, and is inclusive of private ~~PATIENTS~~ and ~~PATIENTS~~ who are ~~Overseas Visitors~~.

It excludes those [PATIENTS](#) who are classified as planned admissions and [Suspended Patients](#).

[ELECTIVE ADMISSION TYPE](#) records the classification of the admission.

#### Data collection

- The NHS report data sets to the [Department of Health](#) monthly and quarterly via Unify2, an online data collection system. Trusts and [Primary Care Trusts](#) can either enter data directly onto Unify2, or upload from spreadsheets provided to ease data input.
- These returns flow through [Strategic Health Authorities](#), and require their sign off before they are accessed by the [Department of Health](#).
- Data providers are required to submit data by the 15th working day following the month end, with publication being on the Friday following the 20th working day after month end.

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#### ADMITTED PATIENT STOCKS DATA SET OVERVIEW (RETIRED)\_ renamed from ADMITTED PATIENT STOCKS DATA SET OVERVIEW

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

- Retired Admitted Patient Stocks Data Set Overview
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Overviews.Admitted\_Patient\_Stocks\_Data\_Set\_Overview to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.Admitted\_Patient\_Stocks\_Data\_Set\_Overview
- Changed Description

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#### APPOINTMENT REQUEST

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Change to Supporting Information: Changed Description

~~[Appointment Request](#) is a type of [SERVICE REQUEST](#) for an [APPOINTMENT](#).~~ An [Appointment Request](#) is a type of [SERVICE REQUEST](#) for an [APPOINTMENT](#).

Each originating request may result in one or more [APPOINTMENT OFFER](#), the originating request may be from: Each originating request may result in one or more [APPOINTMENT OFFERS](#), the originating request may be from:

- a. ~~a [PATIENT](#) self-referral [REFERRAL REQUEST](#)~~
- b. ~~a [REFERRAL REQUEST](#) from one [ORGANISATION](#) or [CARE PROFESSIONAL](#) to another [ORGANISATION](#) or [CARE PROFESSIONAL](#)~~
- c. ~~follow up to a previous [APPOINTMENT](#) at which attendance or contact has taken place related to the same [REFERRAL REQUEST](#)~~
- d. ~~an [APPOINTMENT](#) at which attendance did not take place for whatever reason, requiring a new [APPOINTMENT](#) to be made~~
- e. ~~an invitation for an [APPOINTMENT](#) as part of a [HEALTH PROGRAMME](#)~~
- f. ~~an [ACTIVITY](#) which requires an [APPOINTMENT](#) to be made for further care or treatment~~

- a [PATIENT](#) self-referral [REFERRAL REQUEST](#)
- a [REFERRAL REQUEST](#) from one [ORGANISATION](#) or [CARE PROFESSIONAL](#) to another [ORGANISATION](#) or [CARE PROFESSIONAL](#)
- follow up to a previous [APPOINTMENT](#) at which attendance or contact has taken place related to the same [REFERRAL REQUEST](#)
- an [APPOINTMENT](#) at which attendance did not take place for whatever reason, requiring a new [APPOINTMENT](#) to be made
- an invitation for an [APPOINTMENT](#) as part of a [HEALTH PROGRAMME](#)
- an [ACTIVITY](#) which requires an [APPOINTMENT](#) to be made for further care or treatment.

Each [Appointment Request](#) should be reviewed by the receiving [CARE PROFESSIONAL](#), [ORGANISATION](#) or [SERVICE POINT](#) to decide whether an offer of an [APPOINTMENT](#) should be made. [DECISION TO OFFER AN APPOINTMENT DATE](#) records the date the decision was made to offer an [APPOINTMENT](#).

It is on this date it is considered that the [PATIENT](#) has been added to the [Out-Patient Waiting List](#) for the [APPOINTMENT](#) with the expectation that it will take place.

When it is decided that an offer of an [APPOINTMENT](#) should be made then one or more [APPOINTMENT OFFER](#) should be offered each of which will record a separate and different [APPOINTMENT DATE OFFERED](#) and [APPOINTMENT TIME OFFERED](#) to the [PATIENT](#).

The [APPOINTMENT DATE OFFERED](#) and [APPOINTMENT TIME OFFERED](#) of the [APPOINTMENT OFFER](#) equate to the allocated [APPOINTMENT SLOT](#).

When more than one date is offered for the same [Appointment Request](#), the [PATIENT](#) can choose which date and time to accept. [APPOINTMENT ACCEPTED DATE](#) records whether or not the offer has been accepted. [APPOINTMENT ACCEPTED DATE](#) records whether the offer has been accepted. When multiple dates are offered, the [PATIENT](#) should only be allowed to select one of them.

The [SERVICE REQUEST DATE](#) and [SERVICE REQUEST TIME](#) will also be the default created and recorded date and time for each [APPOINTMENT OFFER](#) made for the [Appointment Request](#).

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#### BOOKINGS ADMITTED PATIENT AND OUT-PATIENT PROVIDER DATA SET OVERVIEW (RETIRED)\_ renamed from BOOKINGS ADMITTED PATIENT AND OUT-PATIENT PROVIDER DATA SET OVERVIEW

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

#### Provider Admitted Patient and Out-Patient Bookings: Events During the Reporting Period

- The [Department of Health](#) requires performance management information on ~~[ELECTIVE ADMISSION LIST](#) and [APPOINTMENT WAITING LIST](#)~~ booking events within a specified [REPORTING PERIOD](#).

- The [Department of Health](#) uses the information to help monitor national [WAITING LIST](#) trends. These are used to develop policies and indicate changes which can enable the [WAITING LISTS](#) to be managed more effectively.
- This central information collection requirement is provider based and is submitted by provider [NHS Trusts](#) and provider [Primary Care Trusts](#) regardless of where [PATIENTS](#) live.

#### Admitted Patient Booking Events

- The collection is for:
    - all [PATIENTS](#) for whom a [DECISION TO ADMIT](#) was taken during the [REPORTING PERIOD](#) to place the [PATIENTS](#) on the [ELECTIVE ADMISSION LIST](#) for booked and [WAITING LIST](#) admission
    - and
    - all [PATIENTS](#) for whom a [DECISION TO ADMIT](#) was taken during the [REPORTING PERIOD](#) to place the patients on the [ELECTIVE ADMISSION LIST](#) for booked admission only.
  - It excludes those [PATIENTS](#) who are classified as planned admissions and [Suspended Patients](#).
- [ELECTIVE ADMISSION TYPE](#) records the classification of the admission:
- All [PATIENTS](#) waiting for admission to NHS hospitals should be included, i.e. include [PATIENTS](#) who are private [PATIENTS](#) and [PATIENTS](#) who are [Overseas Visitors](#) where they have an [OVERSEAS VISITOR STATUS](#) of [OVERSEAS VISITOR EXEMPT CATEGORY](#).
- The collection is sub-divided into a count of day case admissions and ordinary admissions. This item has been retired from the NHS Data Model and Dictionary.
- [INTENDED MANAGEMENT](#) records whether a [PATIENT](#) is intended as an ordinary admission (to stay overnight) or a day case admission (not to stay overnight). The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

#### Out-Patient Booking Events

- The collection is for:
    - all [PATIENTS](#) referred within the [REPORTING PERIOD](#) for a first [Out-Patient Appointment](#) by [GENERAL PRACTITIONER](#) written referral where a booking system was used
    - and
    - all [PATIENTS](#) given a first [APPOINTMENT](#) and added to the Out-Patient Waiting List within the [REPORTING PERIOD](#) for a first [Out-Patient Appointment](#) arising from a [GENERAL PRACTITIONER](#) written referral regardless of whether or not a booking system was used.
  - The [APPOINTMENT ACCEPTED DATE](#) of the first [APPOINTMENT](#) indicates which [REPORTING PERIOD](#) the first [APPOINTMENT](#) was added to the [Out-Patient Waiting List](#).
- A first [APPOINTMENT](#) is where [APPOINTMENT FIRST ATTENDANCE](#) is National Code 01 'First appointment' for a first [APPOINTMENT](#) which has taken place.
- Where one or more [APPOINTMENT](#) is recorded for a [PATIENT](#) but none has as yet taken place, the notional 'first appointment' will be the [APPOINTMENT](#) with the earliest [APPOINTMENT DATE](#). This excludes any [APPOINTMENTS](#) which have been cancelled as indicated by a recorded [APPOINTMENT CANCELLED DATE](#).

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

#### BOOKINGS ADMITTED PATIENT AND OUT-PATIENT PROVIDER DATA SET OVERVIEW (RETIRED)\_ renamed from BOOKINGS ADMITTED PATIENT AND OUT-PATIENT PROVIDER DATA SET OVERVIEW

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

- Retired Bookings Admitted Patient and Out-Patient Provider Data Set Overview
- Changed Name from Data.Dictionary.Messages.Central\_Return\_Data\_Sets.Overviews.Bookings\_Admitted\_Patient\_and\_Out-Patient\_Provider\_Data\_Set\_Overview to Retired.Data.Dictionary.Messages.Central\_Returns\_Data\_Sets.Bookings\_Admitted\_Patient\_and\_Out-Patient\_Provider\_Data\_Set\_Overview
- Changed Description

#### CENTRAL RETURN DATA SETS MENU

Change to Supporting Information: Changed Description

- [Admitted Patient Flows](#)
- [Admitted Patient Stocks](#)
- [Ambulance Services \(KA34\)](#)
- [Bookings Admitted Patient and Out-Patient Provider](#)
- [Breast Screening \(KC62\)](#)
- [Breast Screening \(KC63\)](#)
- [Choose and Book Utilisation Commissioner](#)
- [Diagnostics Waiting Times and Activity](#)
- [Diagnostics Waiting Times Census](#)
- [Genitourinary Medicine Access Monthly Monitoring](#)
- [HPV Immunisation Programme Vaccine Monitoring Annual](#)
- [HPV Immunisation Programme Vaccine Monitoring Monthly](#)
- [Immunisation Programmes Activity \(KC50\)](#)



- [Mixed Sex Accommodation](#)
- [National Direct Access Audiology Patient Tracking List](#)
- [National Direct Access Audiology Waiting Times](#)
- [NHS Continuing Healthcare](#)
- [NHS-Funded Nursing Care](#)
- [Out-Patient Flows](#)
- [Out-Patient Stocks](#)
- [Quarterly Bed Availability and Occupancy \(KH03\)](#)
- [Quarterly Monitoring Cancelled Operations](#)
- [Referral to Treatment](#)
- [Stop Smoking Services Quarterly](#)
- [Summarised Activity Flows](#)
- [Summarised Stocks](#)
- [Venous Thromboembolism Risk Assessment](#)

## CHOOSE AND BOOK UTILISATION COMMISSIONER DATA SET OVERVIEW (RETIRED)\_ renamed from CHOOSE AND BOOK UTILISATION COMMISSIONER DATA SET OVERVIEW

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

- The [Department of Health](#) requires performance management information on utilisation of the [Choose and Book](#) System:
- This central information collection requirement is commissioner based and is the aggregation of commissioned [PATIENT](#) activity delivered by provider [NHS Trusts](#) and provider [Primary Care Trusts](#):
- The collection is for all [PATIENTS](#) given an [APPOINTMENT](#) and added to the [Out-Patient Waiting List](#) within the [REPORTING PERIOD](#) arising from a [GENERAL PRACTITIONER](#) referral processed using the [Choose and Book](#) System:
- The [Choose and Book](#) system, during the booking process, issues a unique booking reference number when a [PATIENT](#) is offered one or more [APPOINTMENT DATE OFFERED](#) of an [APPOINTMENT OFFER](#):
- When the [PATIENT](#) accepts an [APPOINTMENT DATE OFFERED](#), the unique booking reference number is considered to be 'converted' i.e. an [APPOINTMENT](#) is created and recorded, and the [PATIENT](#) is placed on an [Out-Patient Waiting List](#) even if subsequently the [PATIENT](#) does not attend or cancels the [APPOINTMENT](#):
- The [APPOINTMENT BOOKING SYSTEM TYPE](#) of the [APPOINTMENT](#) records the type of booking system used and [UNIQUE BOOKING REFERENCE NUMBER \(CONVERTED\)](#) records the 'converted' reference number.

This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## CHOOSE AND BOOK UTILISATION COMMISSIONER DATA SET OVERVIEW (RETIRED)\_ renamed from CHOOSE AND BOOK UTILISATION COMMISSIONER DATA SET OVERVIEW

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

- Retired Choose and Book Utilisation Commissioner Data Set Overview
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Overviews.Choose\_and\_Book\_Utilisation\_Commissioner\_Data\_Set\_Overview to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.Choose\_and\_Book\_Utilisation\_Commissioner\_Data\_Set\_Overview
- Changed Description

## DEFERRED ADMISSION (RETIRED)\_ renamed from DEFERRED ADMISSION

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

[Deferred Admission](#) provides further guidance for classifying an [ADMISSION OFFER OUTCOME](#). This item has been retired from the NHS Data Model and Dictionary.

[Deferred Admissions](#) cover those [PATIENTS](#) with an [ADMISSION OFFER OUTCOME](#) classification of 'Patient failed to arrive' or 'Admission cancelled by, or on behalf of, the patient'. [PATIENTS](#) should only be included in the count of [Deferred Admissions](#) once the offered date for admission has passed. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

See also [Self-Deferred Admission](#). Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## DEFERRED ADMISSION (RETIRED)\_ renamed from DEFERRED ADMISSION

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

- Retired Deferred Admission
- Changed Name from Data\_Dictionary.NHS\_Business\_Definitions.D.Deferred\_Admission to Retired.Data\_Dictionary.NHS\_Business\_Definitions.D.Deferred\_Admission
- Changed Description

## NATIONAL DIRECT ACCESS AUDIOLOGY PATIENT TRACKING LIST DATA SET OVERVIEW (RETIRED)\_ renamed from NATIONAL

## DIRECT ACCESS AUDIOLOGY PATIENT TRACKING LIST DATA SET OVERVIEW

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

The [National Direct Access Audiology Patient Tracking List Data Set](#) collects performance information on a weekly basis, on the Referral to Treatment pathways of [PATIENTS](#) who are receiving NHS-funded audiology treatment in England, who are not already included in the [Referral to Treatment Summary Patient Tracking List Data Set](#). This includes: This item has been retired from the NHS Data Model and Dictionary.

- both analogue and digital hearing aid fittings
- services provided directly by NHS Healthcare Providers and also NHS-funded [PATIENTS](#) treated via the Independent Sector and third sector providers (collected directly or via [Primary Care Trusts](#))
- both new and existing [PATIENTS](#)
- any other [PATIENTS](#) attending Audiology services directly

For the purposes of the [National Direct Access Audiology Patient Tracking List Data Set](#), "Direct Access" means [PATIENTS](#) who are not referred via Ear, Nose and Throat (ENT) or other hospital [CONSULTANT](#). Any pathways that are subject to the 18 weeks waiting time target for Referral to Treatment are out of scope. For this reason [PATIENTS](#) on Ear, Nose and Throat pathways (or pathways from other specialities) are excluded from this central return data set – information on these [PATIENTS](#) is available via the [Referral to Treatment Summary Patient Tracking List Data Set](#) data collection. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

The [National Direct Access Audiology Patient Tracking List Data Set](#) is in two parts, as follows: Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

Parts 1A and 1B: Untreated Patients

Part 1A should be completed for [PATIENTS](#) who have not had an [ACTIVITY](#) which ends their [REFERRAL TO TREATMENT PERIOD](#) (such as first definitive treatment, or a decision not to treat)

AND

who do not have a future [APPOINTMENT](#) for an [ACTIVITY](#) with an anticipated [REFERRAL TO TREATMENT PERIOD STATUS](#) of 30 before the [REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE](#).

Part 1B should be completed for [PATIENTS](#) who have not had an [ACTIVITY](#) which ends their [REFERRAL TO TREATMENT PERIOD](#) (such as first definitive treatment, or a decision not to treat)

AND

whose [REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE](#) has passed.

Part 2 should be completed for [PATIENTS](#) who have a [REFERRAL TO TREATMENT PERIOD END DATE](#) within the last 7 days

For further guidance, see [NHS England](#) website at: [Direct Access Audiology](#).

## NATIONAL DIRECT ACCESS AUDIOLOGY PATIENT TRACKING LIST DATA SET OVERVIEW (RETIRED)\_ renamed from NATIONAL DIRECT ACCESS AUDIOLOGY PATIENT TRACKING LIST DATA SET OVERVIEW

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

- Retired National Direct Access Audiology Patient Tracking List Data Set Overview
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Overviews.National\_Direct\_Access\_Audiology\_Patient\_Tracking\_List\_Data\_Set\_Overview to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.National\_Direct\_Access\_Audiology\_Patient\_Tracking\_List\_Data\_Set\_Overview
- Changed Description

## OTHER APPOINTMENT

Change to Supporting Information: Changed Description

An [Other Appointment](#) is an [APPOINTMENT](#).

An [Other Appointment](#) is an [APPOINTMENT](#) for a [PATIENT](#) to see a [CARE PROFESSIONAL](#).

This general purpose type is used when a specific defined type of [APPOINTMENT](#) does not exist as a separate classification of [APPOINTMENT CLASSIFICATION CODE](#). An example of a specific defined type of [APPOINTMENT](#) is [Out-Patient Appointment Consultant](#).

Information recorded for an [Other Appointment](#) includes:

[APPOINTMENT DATE](#)  
[APPOINTMENT TIME](#)  
[APPOINTMENT BOOKING SYSTEM TYPE](#)  
[APPOINTMENT TYPE](#) (colposcopy appointments only)  
[ATTENDED OR DID NOT ATTEND](#)

## OUT-PATIENT APPOINTMENT

Change to Supporting Information: Changed Description

An [Out-Patient Appointment](#) is an [APPOINTMENT](#).

An [Out-Patient Appointment](#) is an [APPOINTMENT](#) for a [PATIENT](#) to see or have contact with a [CARE PROFESSIONAL](#) at an [Out-Patient Clinic](#).

Each [Out-Patient Appointment](#) is either an [Out-Patient Appointment Consultant](#) or an [Out-Patient Appointment Non-Consultant](#).

Information recorded for an [Out-Patient Appointment](#) includes:

[APPOINTMENT DATE](#)  
[APPOINTMENT TIME](#)  
[APPOINTMENT BOOKING SYSTEM TYPE](#)  
[APPOINTMENT TYPE](#) (colposcopy appointments only)  
[ATTENDED OR DID NOT ATTEND](#)

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## OUT-PATIENT EFFECTIVE WAITING TIME CALCULATION (RETIRED)\_ renamed from OUT-PATIENT EFFECTIVE WAITING TIME CALCULATION

---

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

~~For collection of information on Out-Patient data sets, the period of waiting for each [PATIENT](#) expressed as weeks waiting is required to be calculated in order to determine the appropriate waiting time band the [PATIENT](#) should be counted within. This item has been retired from the NHS Data Model and Dictionary.~~

~~The start point of the waiting period calculation is either the [ORIGINAL REFERRAL REQUEST RECEIVED DATE](#) or the [FIRST ATTENDANCE EFFECTIVE WAIT START DATE](#) which takes into consideration any [PATIENT](#) instigated resets. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.~~

~~The end point is either the [ACTIVITY DATE](#) of the [Out-Patient Attendance Consultant CARE CONTACT](#) when an attendance has taken place or the [REPORTING PERIOD END DATE](#) depending upon the criteria of the waiting time being calculated. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.~~

~~Subtract the number of days of the [FIRST ATTENDANCE EFFECTIVE WAIT START DATE](#) from the number of days of the [ACTIVITY DATE](#) or [REPORTING PERIOD END DATE](#), this results in the number of days of the effective waiting time period.~~

~~The number of days is then divided by 7 to give the number of whole weeks. For example, if the number of days waiting is 49 then the number of weeks is 7 weeks, if the number of days waiting is 30 then the number of weeks is more than 4 weeks but less than 5 weeks time band.~~

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## OUT-PATIENT EFFECTIVE WAITING TIME CALCULATION (RETIRED)\_ renamed from OUT-PATIENT EFFECTIVE WAITING TIME CALCULATION

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

- Retired Out-Patient Effective Waiting Time Calculation
- Changed Name from Data\_Dictionary.NHS\_Business\_Definitions.O.Out-Patient\_Effective\_Waiting\_Time\_Calculation to Retired.Data\_Dictionary.NHS\_Business\_Definitions.O.Out-Patient\_Effective\_Waiting\_Time\_Calculation
- Changed Description

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## OUT-PATIENT FLOWS DATA SET OVERVIEW (RETIRED)\_ renamed from OUT-PATIENT FLOWS DATA SET OVERVIEW

---

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

- ~~The [Department of Health](#) requires performance management information on [Out-Patient Waiting List](#) events within a specified [REPORTING PERIOD](#).~~
- ~~The [Department of Health](#) uses the information to help monitor national [WAITING LIST](#) trends. These are used to develop policies and indicate changes which can enable the [WAITING LISTS](#) to be managed more effectively.~~
- ~~This central information collection requirement is both:~~

~~provider based and is submitted by provider [NHS Trusts](#) and provider [Primary Care Trusts](#) regardless of where [PATIENTS](#) live. This item has been retired from the NHS Data Model and Dictionary.~~

~~and The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.~~

~~commissioner based and is the aggregation of commissioned [PATIENT](#) activity delivered by provider [NHS Trusts](#) and provider [Primary Care Trusts](#). Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.~~

- ~~Each submission will be from one [ORGANISATION](#) in the role of provider or commissioner and should only contain data appropriate to that role i.e. must not contain a mixture of commissioning and provider role data.~~

~~[COMMISSIONER OR PROVIDER STATUS INDICATOR](#) indicates whether it is a submission from the [ORGANISATION](#) in the role of commissioner of care or provider of care.~~

### Out-Patient Flow Events

- ~~The collection data is sub-grouped by [MAIN SPECIALTY CODE](#). Where no flow activity data for a [MAIN SPECIALTY CODE](#) has occurred within the [REPORTING PERIOD](#) then no out-patient flow sub-group should be recorded for it. Only one sub-group is permitted per [MAIN SPECIALTY CODE](#)~~
- ~~The collection is for:~~  
  
~~all [GENERAL PRACTITIONER](#) written referrals, whether from doctor or dentists, received within the [REPORTING PERIOD](#) for a first [Out-Patient Appointment Consultant](#)~~

and

all non-[GENERAL PRACTITIONER](#) written referrals received within the [REPORTING PERIOD](#) for a first [Out-Patient Appointment Consultant](#)

and

all [GENERAL PRACTITIONER](#) written referrals, whether from doctor or dentists, for a first [Out-Patient Appointment Consultant](#) where the first [Out-Patient Attendance Consultant](#) took place within the [REPORTING PERIOD](#) and the period between the receipt of the referral and the attendance by specified waiting time band

and

all [GENERAL PRACTITIONER](#) written referrals, whether from doctor or dentists, for a first [Out-Patient Appointment Consultant](#) where the first [Out-Patient Attendance Consultant](#) has not yet taken place and the period between the receipt of the referral and the [REPORTING PERIOD END DATE](#) by specified waiting time band

and

all first attendance [APPOINTMENTS](#) where the first [Out-Patient Attendance Consultant](#) took place within the [REPORTING PERIOD](#)

and

all first attendance [APPOINTMENTS](#) where the first [Out-Patient Attendance Consultant](#) should have taken place within the [REPORTING PERIOD](#) did not take place due to the patient not attending or not attending on time

and

all follow-up attendance [APPOINTMENTS](#) where the [Out-Patient Attendance Consultant](#) took place within the [REPORTING PERIOD](#)

and

all follow-up attendance [APPOINTMENTS](#) where the follow-up [Out-Patient Attendance Consultant](#) should have taken place within the [REPORTING PERIOD](#) did not take place due to the [PATIENT](#) not attending or not attending on time

- It includes private [PATIENTS](#) and [PATIENTS](#) who are [Overseas Visitors](#).

#### Data collection

- The NHS report data sets to the [Department of Health](#) monthly and quarterly via Unify2, an online data collection system. Trusts and [Primary Care Trusts](#) can either enter data directly onto Unify2, or upload from spreadsheets provided to ease data input.
- These returns flow through [Strategic Health Authorities](#), and require their sign off before they are accessed by the [Department of Health](#).
- Data providers are required to submit data by the 15th working day following the month end, with publication being on the Friday following the 20th working day after month end.

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#### OUT-PATIENT FLOWS DATA SET OVERVIEW (RETIRED)\_ renamed from OUT-PATIENT FLOWS DATA SET OVERVIEW

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

- Retired Out-Patient Flows Data Set Overview
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Overviews.Out-Patient\_Flows\_Data\_Set\_Overview to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.Out-Patient\_Flows\_Data\_Set\_Overview
- Changed Description

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#### OUT-PATIENT STOCKS DATA SET OVERVIEW (RETIRED)\_ renamed from OUT-PATIENT STOCKS DATA SET OVERVIEW

---

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

- The [Department of Health](#) requires performance management information on [Out-Patient Waiting List](#) stocks within a specified [REPORTING PERIOD](#).
- The [Department of Health](#) uses the information to help monitor national [WAITING LIST](#) trends. These are used to develop policies and indicate changes which can enable the [WAITING LISTS](#) to be managed more effectively.
- This central information collection requirement is both:

provider based and is submitted by provider [NHS Trusts](#) and provider [Primary Care Trusts](#) regardless of where [PATIENTS](#) live. This item has been retired from the NHS Data Model and Dictionary.

and The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

commissioner based and is the aggregation of commissioned [PATIENT](#) activity delivered by provider [NHS Trusts](#) and provider [Primary Care Trusts](#). Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

- Each submission will be from one [ORGANISATION](#) in the role of provider or commissioner and should only contain data appropriate to that role i.e. must not contain a mixture of commissioning and provider role data.

[COMMISSIONER OR PROVIDER STATUS INDICATOR](#) indicates whether it is a submission from the [ORGANISATION](#) in the role of commissioner of care or provider of care.

## Out-Patient Stocks

- The collection data is sub-grouped by [MAIN SPECIALTY CODE](#). Where no stocks data for a [MAIN SPECIALTY CODE](#) is present within the [REPORTING PERIOD](#) then no out-patient stock sub group should be recorded for it. Only one sub group is permitted per [MAIN SPECIALTY CODE](#).
- The collection is for all [GENERAL PRACTITIONER](#) written referrals, whether from doctor or dentists, for a first [Out-Patient Appointment Consultant](#) where the first [Out-Patient Attendance Consultant](#) has not yet taken place and the period between the receipt of the referral and the [REPORTING PERIOD END DATE](#) by specified waiting time band.
- It includes private [PATIENTS](#) and [PATIENTS](#) who are [Overseas Visitors](#).

## Data collection

- The NHS report data sets to the [Department of Health](#) monthly and quarterly via Unify2, an online data collection system. Trusts and [Primary Care Trusts](#) can either enter data directly onto Unify2, or upload from spreadsheets provided to ease data input.
- These returns flow through [Strategic Health Authorities](#), and require their sign off before they are accessed by the [Department of Health](#).
- Data providers are required to submit data by the 15th working day following the month end, with publication being on the Friday following the 20th working day after month end.

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## OUT-PATIENT STOCKS DATA SET OVERVIEW (RETIRED)\_ renamed from OUT-PATIENT STOCKS DATA SET OVERVIEW

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

- Retired Out-Patient Stocks Data Set Overview
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Overviews.Out-Patient\_Stocks\_Data\_Set\_Overview to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.Out-Patient\_Stocks\_Data\_Set\_Overview
- Changed Description

---

## SELF-DEFERRED ADMISSION (RETIRED)\_ renamed from SELF-DEFERRED ADMISSION

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

[Self-Deferred Admission](#) provides further guidance for classifying an [ADMISSION-OFFER OUTCOME](#). This item has been retired from the NHS Data Model and Dictionary.

Admissions cancelled by, or on behalf of, [PATIENTS](#) are known as [Self-Deferred Admissions](#). These include [PATIENTS](#) who fail to attend for admission. [PATIENTS](#) should only be classed as [Self-Deferred Admissions](#) once the intended admission date has passed. The cancellations may be made by a relative, friend or executor, if the [PATIENT](#) is unable to notify the hospital for themselves, e.g. because of handicap or extreme youth. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

See [Deferred Admission](#) and also [ADMISSION-OFFER OUTCOME](#). Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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## SELF-DEFERRED ADMISSION (RETIRED)\_ renamed from SELF-DEFERRED ADMISSION

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

- Retired Self-Deferred Admission
- Changed Name from Data\_Dictionary.NHS\_Business\_Definitions.S.Self-Deferred\_Admission to Retired.Data\_Dictionary.NHS\_Business\_Definitions.S.Self-Deferred\_Admission
- Changed Description

---

## SUMMARISED ACTIVITY FLOWS DATA SET OVERVIEW (RETIRED)\_ renamed from SUMMARISED ACTIVITY FLOWS DATA SET OVERVIEW

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

- The [Department of Health](#) requires performance management information on [ELECTIVE ADMISSION LIST](#) and [Out-Patient Waiting List](#) events within a specified [REPORTING PERIOD](#).
- The [Department of Health](#) uses the information to help monitor national [WAITING LIST](#) trends. These are used to develop policies and indicate changes which can enable the [WAITING LISTS](#) to be managed more effectively.
- This central information collection requirement is both:  
  
provider based and is submitted by provider [NHS Trusts](#) and provider [Primary Care Trusts](#) regardless of where [PATIENTS](#) live. This item has been retired from the NHS Data Model and Dictionary.  
  
and The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.  
  
commissioner based and is the aggregation of commissioned [PATIENT](#) activity delivered by provider [NHS Trusts](#) and provider [Primary Care Trusts](#). Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.
- Each submission will be from one [ORGANISATION](#) in the role of provider or commissioner and should only contain data appropriate to that role i.e. must not contain a mixture of commissioning and provider role data.  
  
[COMMISSIONER OR PROVIDER STATUS INDICATOR](#) indicates whether it is a submission from the [ORGANISATION](#) in the role of commissioner of

care or provider of care:

#### Admitted Patient Flow Events Elective Admission List

- The collection data is sub-grouped by totals for all [MAIN SPECIALTY CODES](#) and for [MAIN SPECIALTY CODE](#) 110 Trauma & Orthopaedics only:
- The collection is for:
  - all [PATIENTS](#) admitted during the [REPORTING PERIOD](#) from the [Elective Admission List](#) subdivided into count of day case admissions and ordinary admissions
  - and
  - all [PATIENTS](#) admitted during the [REPORTING PERIOD](#) from the [Elective Admission List](#) as planned admission during the [REPORTING PERIOD](#)
  - and
  - all [PATIENTS](#) admitted during the [REPORTING PERIOD](#) from the [Elective Admission List](#) to a NHS Treatment Centre and Independent Sector Treatment Centre during the [REPORTING PERIOD](#)
- It includes private [PATIENTS](#) and [PATIENTS](#) who are [Overseas Visitors](#):
- It excludes [Suspended Patients](#):
- [ELECTIVE ADMISSION TYPE](#) records the classification of the admission:
- The collection is sub-divided into a count of day case admissions and ordinary admissions:
  - [INTENDED MANAGEMENT](#) records whether a [PATIENT](#) is intended as an ordinary admission (to stay overnight) or a day case admission (not to stay overnight):

#### Admitted Patient Flow Events non-Elective Admissions

- The collection data is grouped by totals for [ADMISSION INTENDED PROCEDURE](#) which indicates the required range of [OPERATIVE PROCEDURES](#) and by admission to NHS Hospitals and non-NHS Hospitals:
- The required grouping ranges of [ADMISSION INTENDED PROCEDURE](#) are:
  - 0001 CABG – Coronary Artery Bypass Graft Code Range:
  - or
  - 0002 PTCA – Percutaneous Transluminal Operations Coding Range:
  - or
  - 0005 CHD – Coronary Heart Disease Coding Range
- [ORGANISATION TYPE](#) of [ORGANISATION](#) records whether the hospital provider is an NHS or non-NHS [ORGANISATION](#):
- The collection is for all [PATIENTS](#) admitted non-electively during the [REPORTING PERIOD](#):
  - all [PATIENTS](#) admitted during the [REPORTING PERIOD](#) from the [Elective Admission List](#) to a NHS Treatment Centre and Independent Sector during the [REPORTING PERIOD](#)
- For NHS [Hospital Providers](#) it includes private [PATIENTS](#) and [PATIENTS](#) who are [Overseas Visitors](#):
- It excludes [Suspended Patients](#):
- [ELECTIVE ADMISSION TYPE](#) records the classification of the admission:

#### Out-Patient Referral Flow Events

- The collection data is sub-grouped by totals for all [MAIN SPECIALTY CODE](#) and for [MAIN SPECIALTY CODE](#) 110 Trauma & Orthopaedics only:
- The collection is for:
  - all [GENERAL PRACTITIONER](#) written referrals, whether from doctor or dentists, received within the [REPORTING PERIOD](#) for a first [Out-Patient Appointment Consultant](#)
  - and
  - all [FIRST ATTENDANCE APPOINTMENTS](#) arising from [GENERAL PRACTITIONER](#) written referrals, whether from doctors or dentists, where the [Out-Patient Attendance Consultant](#) took place within the [REPORTING PERIOD](#):
- It includes private [PATIENTS](#) and [PATIENTS](#) who are [Overseas Visitors](#):

#### SUMMARISED ACTIVITY FLOWS DATA SET OVERVIEW (RETIRED)\_ renamed from SUMMARISED ACTIVITY FLOWS DATA SET OVERVIEW

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

- Retired Summarised Activity Flows Data Set Overview
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Overviews.Summarised\_Activity\_Flows\_Data\_Set\_Overview to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.Summarised\_Activity\_Flows\_Data\_Set\_Overview
- Changed Description

#### SUMMARISED STOCKS DATA SET OVERVIEW (RETIRED)\_ renamed from SUMMARISED STOCKS DATA SET OVERVIEW

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

- The [Department of Health](#) requires performance management information on [ELECTIVE ADMISSION LIST](#) stocks at the end of a specified [REPORTING PERIOD](#).
- The [Department of Health](#) uses the information to help monitor national [WAITING LIST](#) trends. These are used to develop policies and indicate changes which can enable the [WAITING LISTS](#) to be managed more effectively.
- This central information collection requirement is both:  
  
provider based and is submitted by provider [NHS Trusts](#) and provider [Primary Care Trusts](#) regardless of where [PATIENTS](#) live. This item has been retired from the NHS Data Model and Dictionary.  
  
and The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.  
  
commissioner based and is the aggregation of commissioned [PATIENT](#) activity delivered by provider [NHS Trusts](#) and provider [Primary Care Trusts](#). Access to this version can be obtained by emailing [informationstandards@hscic.gov.uk](mailto:informationstandards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.
- Each submission will be from one [ORGANISATION](#) in the role of provider or commissioner and should only contain data appropriate to that role i.e. must not contain a mixture of commissioning and provider role data.  
  
[COMMISSIONER OR PROVIDER STATUS INDICATOR](#) indicates whether it is a submission from the [ORGANISATION](#) in the role of commissioner of care or provider of care.

#### Admitted Patient Stock Group Main Specialty Code 110 Trauma and Orthopaedics

- The collection data is grouped by ordinary admissions and day case admissions for [MAIN SPECIALTY CODE](#) 110 Trauma & Orthopaedics only.
- The collection is for:  
  
all [PATIENTS](#) for who have an [OFFER OF ADMISSION MADE DATE](#) before or on the [REPORTING PERIOD END DATE](#) and are waiting to be admitted from the [Elective Admission List](#)  
  
and  
  
all [PATIENTS](#) for who have an [OFFER OF ADMISSION MADE DATE](#) before or on the [REPORTING PERIOD END DATE](#) and are waiting to be admitted by specified waiting time band from the [Elective Admission List](#)
- It includes those [PATIENTS](#) who are classified as booked admissions and waiting list admissions, and is inclusive of private [PATIENTS](#) and [PATIENTS](#) who are [Overseas Visitors](#).  
  
It excludes those [PATIENTS](#) who are classified as planned admissions and [Suspended Patients](#).  
  
[ELECTIVE ADMISSION TYPE](#) records the classification of the admission.

#### Summarised Admitted Patient Stock Group Intended Procedures for Ordinary Admissions

- The collection data is grouped by [ADMISSION INTENDED PROCEDURE](#) which indicates the required range of [OPERATIVE PROCEDURE](#). Where there are no stocks present for a [ADMISSION INTENDED PROCEDURE](#) within the [REPORTING PERIOD](#) then no in-patient stocks group should be recorded for it. Only one group is permitted per [ADMISSION INTENDED PROCEDURE](#).
- The required grouping ranges of [ADMISSION INTENDED PROCEDURE](#) are:  
  
0001 CABG – Coronary Artery Bypass Graft Code Range:  
or  
0002 PTCA – Percutaneous Transluminal Operations Coding Range:  
or  
0003 Valves Coding Range  
or  
0004 – Angiography Coding Range
- Within the [ADMISSION INTENDED PROCEDURE](#) the collection only applies to [PATIENTS](#) waiting for admission as ordinary admissions as indicated by [INTENDED MANAGEMENT](#).
- The collection is for:  
  
all [PATIENTS](#) for who have an [OFFER OF ADMISSION MADE DATE](#) before or on the [REPORTING PERIOD END DATE](#) and are waiting to be admitted from the [Elective Admission List](#)  
  
and  
  
all [PATIENTS](#) for who have an [OFFER OF ADMISSION MADE DATE](#) before or on the [REPORTING PERIOD END DATE](#) and are waiting to be admitted by specified waiting time band from the [Elective Admission List](#)
- It includes those [PATIENTS](#) who are classified as booked admissions and waiting list admissions, and is inclusive of private [PATIENTS](#) and [PATIENTS](#) who are [Overseas Visitors](#).  
  
It excludes those [PATIENTS](#) who are classified as planned admissions and [Suspended Patients](#).  
  
[ELECTIVE ADMISSION TYPE](#) records the classification of the admission.

#### Out-Patient Stock Group Main Specialty Code 110 Trauma and Orthopaedics

- The collection data is for [MAIN SPECIALTY CODE](#) 110 Trauma and Orthopaedics only.

- The collection is for all [PATIENTS](#) referred by [GENERAL PRACTITIONER](#) written referral for a first [Out-Patient Appointment Consultant](#) where the [APPOINTMENT](#) has not taken place by the [REPORTING PERIOD END DATE](#) by specified waiting time band:
- It includes private [PATIENTS](#) and [PATIENTS](#) who are [Overseas Visitors](#):

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## SUMMARISED STOCKS DATA SET OVERVIEW (RETIRED)\_ renamed from SUMMARISED STOCKS DATA SET OVERVIEW

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

- Retired Summarised Stocks Data Set Overview
- Changed Name from Data\_Dictionary.Messages.Central\_Return\_Data\_Sets.Overviews.Summarised\_Stocks\_Data\_Set\_Overview to Retired.Data\_Dictionary.Messages.Central\_Returns\_Data\_Sets.Summarised\_Stocks\_Data\_Set\_Overview
- Changed Description

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## SUSPENDED PATIENT (RETIRED)\_ renamed from SUSPENDED PATIENT

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

[Suspended Patient](#) provides further guidance for suspending a [PATIENT](#) on a hospital [ELECTIVE ADMISSION LIST](#). This item has been retired from the NHS Data Model and Dictionary.

A [PATIENT](#) is suspended from the [ELECTIVE ADMISSION LIST](#) for medical reasons or is unavailable for admission for a specified period because of family commitments, holidays or other reasons. During this period of suspension, a [PATIENT](#) on an [ELECTIVE ADMISSION LIST](#) is unavailable for admission and therefore should not be given an [OFFER OF ADMISSION](#) for this interval. Note that a [PATIENT](#) cannot be suspended from the elective waiting list after an [OFFER OF ADMISSION](#) has been made. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Periods of suspension are normally deducted from the waiting time from the [OFFER OF ADMISSION](#). However if the [PATIENT](#) has self-deferred, the period of suspension will be deducted from the date offered for admission which was refused. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

In some instances, a [PATIENT](#) who is medically unfit for treatment could be removed from the waiting list altogether, but it should be stressed that this would need to be a clinical judgement made locally. [PATIENTS](#) on an [ELECTIVE ADMISSION LIST](#) should be those who need treatment and who are likely to be fit for surgery when offered admission. The Waiting List Action Team Handbook: Getting Patients Treated (August 1999) issued by the [Department of Health](#) states that only [PATIENTS](#) who are clinically ready to undergo surgery should be placed on a waiting list for surgery. However, [PATIENTS](#) can become medically unfit for treatment while already on an [ELECTIVE ADMISSION LIST](#). They may develop conditions, such as diabetes or obesity, that need to be treated before surgery can take place.

Once the period of suspension has passed, the [PATIENT](#) is restored to valid membership of an [ELECTIVE ADMISSION LIST](#).

Each period of suspension for a [PATIENT](#) from an [ELECTIVE ADMISSION LIST ENTRY](#) is recorded by an [ELECTIVE ADMISSION SUSPENSION DETAIL](#) with the [LIST SUSPENSION START DATE](#) and [LIST SUSPENSION END DATE](#) recording the start and end points of the period. Where no [LIST SUSPENSION END DATE](#) is present then the period of suspension is still ongoing.

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## SUSPENDED PATIENT (RETIRED)\_ renamed from SUSPENDED PATIENT

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

- Retired Suspended Patient
- Changed Name from Data\_Dictionary.NHS\_Business\_Definitions.S.Suspended\_Patient to Retired.Data\_Dictionary.NHS\_Business\_Definitions.S.Suspended\_Patient
- Changed Description

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## APPOINTMENT OFFER

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Change to Class: Changed Attributes

*Attributes of this Class are:*

K APPOINTMENT DATE OFFERED  
 K APPOINTMENT TIME OFFERED  
 APPOINTMENT ACCEPTED DATE  
 APPOINTMENT CLASSIFICATION CODE  
 APPOINTMENT OFFER ACCEPTED OR REFUSED  
 APPOINTMENT OFFER REFUSED REASON  
~~APPOINTMENT OFFER SLOT STATUS~~  
 INVITATION OFFER DATE SENT  
 INVITATION TYPE  
 PATIENT PREFERRED CLINIC INDICATOR  
 REASONABLE OFFER INDICATOR  
 REPLACEMENT APPOINTMENT BOOKED DATE FOR COMMUNITY CARE  
 REPLACEMENT APPOINTMENT DATE OFFERED FOR COMMUNITY CARE  
 REQUEST OR INVITATION

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## APPOINTMENT SLOT

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Change to Class: Changed Description, Attributes

A period of time within a [SESSION](#) for one or more [APPOINTMENTS](#) with a [CARE PROFESSIONAL](#).

[APPOINTMENT SLOTS](#) may be of variable length e.g. to accommodate new [PATIENTS](#), and may be allocated more than once, if the original



[APPOINTMENT](#) is cancelled.

An [APPOINTMENT SLOT](#) can be allocated to one or more [APPOINTMENT OFFER](#) until an offer is accepted by, or on behalf of a [PATIENT](#).

~~When an [APPOINTMENT OFFER](#) is accepted by, or on behalf of a [PATIENT](#) the [APPOINTMENT SLOT](#) becomes booked and may become unavailable for any other offered [APPOINTMENT](#) to which it was allocated depending upon the [APPOINTMENT SLOT TYPE](#). When an [APPOINTMENT OFFER](#) is accepted by, or on behalf of a [PATIENT](#) the [APPOINTMENT SLOT](#) becomes booked and may become unavailable for any other offered [APPOINTMENT](#) to which it was allocated.~~

~~[APPOINTMENT SLOT STATUS](#) should be used in conjunction with [APPOINTMENT SLOT TYPE](#) and [APPOINTMENT OFFER SLOT STATUS](#) to ensure correct allocation and booking of [APPOINTMENTS](#).~~

---

## APPOINTMENT SLOT

---

Change to Class: Changed Description, Attributes

*Attributes of this Class are:*

K	APPOINTMENT SLOT NUMBER
	<del>APPOINTMENT SLOT STATUS</del>
	<del>APPOINTMENT SLOT TYPE</del>

---

## ELECTIVE ADMISSION LIST ENTRY

---

Change to Class: Changed Attributes

*Attributes of this Class are:*

K	ELECTIVE ADMISSION LIST ENTRY NUMBER
	ADMISSION BOOKING SYSTEM TYPE
	<del>ELECTIVE ADMISSION EFFECTIVE WAIT START DATE</del>
	ELECTIVE ADMISSION LAST REVIEWED DATE
	ELECTIVE ADMISSION LIST REMOVAL DATE
	ELECTIVE ADMISSION LIST REMOVAL REASON
	ELECTIVE ADMISSION TYPE
	GUARANTEED ADMISSION DATE
	INTENDED MANAGEMENT
	ORIGINAL DECIDED TO ADMIT DATE
	PREVIOUS PROVIDER OFFERED ADMISSION DATE
	WAITING PERIOD EXCLUSION

---

## OFFER OF ADMISSION

---

Change to Class: Changed Description, Attributes

This records each [OFFER OF ADMISSION](#) made to a [PATIENT](#) on the [ELECTIVE ADMISSION LIST](#).

When a [PATIENT](#) is given a set of more than one [OFFERED FOR ADMISSION DATES](#), each [OFFER OF ADMISSION](#) in the set should record the same [OFFER OF ADMISSION GROUP IDENTIFIER](#).

When the [PATIENT](#) accepts an [OFFERED FOR ADMISSION DATE](#), it is this offered date that the [PATIENT](#) is expected to attend and be admitted. ~~[ADMISSION OFFER OUTCOME](#) records whether or not the [PATIENT](#) was admitted and the circumstances that applied. [ADMISSION OFFER OUTCOME](#) records whether or not the [PATIENT](#) was admitted and the circumstances that applied.~~

---

## OFFER OF ADMISSION

---

Change to Class: Changed Description, Attributes

*Attributes of this Class are:*

K	OFFERED FOR ADMISSION DATE
K	OFFER OF ADMISSION MADE DATE
K	OFFER OF ADMISSION MADE TIME
	ADMISSION OFFER OUTCOME
	OFFER OF ADMISSION ACCEPTED DATE
	<del>OFFER OF ADMISSION ACCEPTED OR REFUSED</del>
	OFFER OF ADMISSION GROUP IDENTIFIER
	<del>OFFER OF ADMISSION VERBAL OR WRITTEN</del>
	OPERATION CANCELLATION
	OPERATION CANCELLATION PATIENT CHOICE
	REASONABLE OFFER INDICATOR

---

## ORGANISATION SITE

---

Change to Class: Changed Attributes

*Attributes of this Class are:*

K	ORGANISATION SITE CODE
	ACCREDITED DATE
	COMMUNITY PHARMACY SITE CLOSED DATE
	COMMUNITY PHARMACY SITE OPENED DATE

DECOMMISSIONED DATE  
 DELIVERY FACILITIES AVAILABLE  
 DISTANCE TO NEXT AVAILABLE PHARMACY  
 ESSENTIAL SMALL PHARMACY INDICATOR  
 GMP PREMISES COST RENT SUB STANDARD  
 GMP PREMISES SUB STANDARD  
 HIGH SECURITY PSYCHIATRIC ACCOMMODATION  
 INDEPENDENT HEALTH CARE FACILITY TYPE  
 OPTICIAN PREMISES TYPE  
 ORGANISATION SITE CLASSIFICATION  
 ORGANISATION SITE END DATE  
 ORGANISATION SITE NAME  
 ORGANISATION SITE START DATE  
~~ORGANISATION SITE TREATMENT CENTRE~~  
 ORGANISATION SITE TYPE  
 ORIGIN  
 OXYGEN SERVICE SUPPLIER INDICATOR  
 PROVIDING CARE TO CHILDREN  
 UNWANTED MEDICINE SCHEME INDICATOR

---

## REFERRAL REQUEST

---

Change to Class: Changed Attributes

Attributes of this Class are:

~~APPOINTMENT BOOKING SYSTEM TYPE~~  
 BENIGN THERAPEUTIC OPERATION INDICATOR  
 COLPOSCOPY REFERRAL INDICATION  
 COMMISSIONER REFERENCE NUMBER  
~~FIRST ATTENDANCE EFFECTIVE WAIT START DATE~~  
 OTHER REFERRER CODE  
 OUT-PATIENT CLINIC REFERRING INDICATOR  
 OUT-PATIENT REFERRAL INDICATOR  
 REASON FOR REFERRAL TO COMMUNITY CARE  
 REFERRAL CLOSURE REASON FOR COMMUNITY CARE  
 REFERRAL REQUEST ACCEPTANCE INDICATOR  
 REFERRAL REQUEST RECEIVED TIME  
 REFERRAL REQUEST SERVICE TYPE FOR NHS HEALTH CHECK  
 REFERRAL REQUEST TYPE  
 SCREENING REFERRAL SOURCE  
 SERVICE TYPE REQUESTED  
 SERVICE TYPE REQUESTED FOR CHILD AND ADOLESCENT MENTAL HEALTH  
 SOURCE OF REFERRAL FOR A and E  
 SOURCE OF REFERRAL FOR COMMUNITY  
 SOURCE OF REFERRAL FOR COMMUNITY DENTAL  
 SOURCE OF REFERRAL FOR DRUG MISUSE  
 SOURCE OF REFERRAL FOR MENTAL HEALTH  
 SOURCE OF REFERRAL FOR OUT-PATIENTS  
 SOURCE OF REFERRAL FOR PROF STAFF GROUP  
 TWO WEEK WAIT CANCER OR SYMPTOMATIC BREAST REFERRAL TYPE  
 TWO WEEK WAIT EXCLUSION INDICATOR  
~~WRITTEN REFERRAL REQUEST INDICATOR~~

---

## SERVICE REQUEST

---

Change to Class: Changed Attributes

Attributes of this Class are:

K SERVICE REQUEST IDENTIFIER  
 APPOINTMENT CLASSIFICATION CODE  
~~APPOINTMENT OFFER VERBAL OR WRITTEN~~  
 CLINICAL RESPONSE PRIORITY TYPE  
 DECISION TO OFFER AN APPOINTMENT DATE  
 DIAGNOSTIC SERVICE REQUEST TYPE  
 DIRECT ACCESS REFERRAL INDICATOR  
 ORIGINAL REFERRAL REQUEST RECEIVED DATE  
 REFERRAL REQUEST CANCELLED DATE  
 REFERRAL REQUEST RECEIVED DATE  
 SERVICE REQUEST ACCEPTANCE INDICATOR  
 SERVICE REQUEST DATE  
 SERVICE REQUEST RAISED REASON  
 SERVICE REQUEST TIME  
 STATUS OF SERVICE REQUEST FOR MENTAL HEALTH

---

## APPOINTMENT BOOKING SYSTEM TYPE (RETIRED) \_renamed from APPOINTMENT BOOKING SYSTEM TYPE

---

Change to Attribute: Changed status to Retired, Name, Description

The type of booking system used for allocating the [Out-Patient Appointment](#). This item has been retired from the NHS Data Model and Dictionary.

- In any booked system in use, the [PATIENT](#) is given the choice of when to attend.
- In a partial booking system the [PATIENT](#) is given an indication of how long the wait should be and is contacted by the [Health Care Provider](#) at some point after the referral is made to be given a choice of dates for the [APPOINTMENT](#).
- In a full booking system the [PATIENT](#) should be given the opportunity to book an [APPOINTMENT](#) within one working day of the request.

**Classification:** The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

- a: No [PATIENT](#) choice of dates offered for the [Out-Patient Appointment](#)
- b: Partial booking system – non-[Choose and Book](#) system
- c: Full booking system – non-[Choose and Book](#) system
- d: Full booking system – [Choose and Book](#) system

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## APPOINTMENT BOOKING SYSTEM TYPE (RETIRED)\_ renamed from APPOINTMENT BOOKING SYSTEM TYPE

Change to Attribute: Changed status to Retired, Name, Description

- Retired APPOINTMENT BOOKING SYSTEM TYPE
- Changed Name from Data\_Dictionary.Attributes.A.Ap.APPOINTMENT\_BOOKING\_SYSTEM\_TYPE to Retired.Data\_Dictionary.Attributes.A.APPOINTMENT\_BOOKING\_SYSTEM\_TYPE
- Changed Description

## APPOINTMENT OFFER ACCEPTED OR REFUSED

Change to Attribute: Changed Description

~~A record of whether or not the [APPOINTMENT DATE OFFERED](#) and [APPOINTMENT TIME OFFERED](#) of an [APPOINTMENT OFFER](#) was accepted by, or on behalf of the [PATIENT](#).~~ A record of whether the [APPOINTMENT DATE OFFERED](#) and [APPOINTMENT TIME OFFERED](#) of an [APPOINTMENT OFFER](#) was accepted by, or on behalf of the [PATIENT](#).

The date on which [APPOINTMENT OFFER](#) was accepted by, or on behalf of the [PATIENT](#) should be recorded by the [APPOINTMENT ACCEPTED DATE](#).

When the [PATIENT](#) accepts an [APPOINTMENT OFFER](#), the [APPOINTMENT OFFER SLOT STATUS](#) and the [APPOINTMENT SLOT STATUS](#) should be recorded as booked.

**National Codes:**

- 1 Accepted
- 2 Refused

## APPOINTMENT OFFER SLOT STATUS (RETIRED)\_ renamed from APPOINTMENT OFFER SLOT STATUS

Change to Attribute: Changed status to Retired, Name, Description

~~The status of the [APPOINTMENT SLOT](#) for the [APPOINTMENT OFFER](#).~~ This item has been retired from the NHS Data Model and Dictionary.

An [APPOINTMENT SLOT](#) can be allocated to one or more [APPOINTMENT OFFER](#) until an offer is accepted by, or on behalf of a [PATIENT](#). During this period the [APPOINTMENT OFFERS SLOT STATUS](#) of all the [APPOINTMENT OFFERS](#) allocated to the same [APPOINTMENT SLOT](#) should be recorded as ~~'Allocated'~~. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

When an [APPOINTMENT OFFER](#) is accepted by, or on behalf of, a [PATIENT](#) the [APPOINTMENT SLOT](#) becomes booked and will become unavailable for any other offered appointment to which it was allocated unless the [APPOINTMENT SLOT TYPE](#) is *'Multiple appointment booking for the slot'*. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

For the [APPOINTMENT OFFER](#) which was accepted, the [APPOINTMENT OFFER SLOT STATUS](#) should be overwritten and recorded as *'Booked'*.

An [APPOINTMENT OFFER](#) for an [APPOINTMENT SLOT](#) may need to be withdrawn. In these circumstances the [APPOINTMENT OFFER SLOT STATUS](#) should be overwritten and recorded as *'Withdrawn'* and if necessary new offers made.

~~The status of an [APPOINTMENT OFFER](#) should correspond to the status of the [APPOINTMENT SLOT STATUS](#) and be used in conjunction with [APPOINTMENT SLOT TYPE](#).~~

**National Codes:**

- 1 Allocated
- 2 Booked
- 3 Withdrawn

## APPOINTMENT OFFER SLOT STATUS (RETIRED)\_ renamed from APPOINTMENT OFFER SLOT STATUS

Change to Attribute: Changed status to Retired, Name, Description

- Retired APPOINTMENT OFFER SLOT STATUS
- Changed Name from Data\_Dictionary.Attributes.A.Ap.APPOINTMENT\_OFFER\_SLOT\_STATUS to Retired.Data\_Dictionary.Attributes.A.APPOINTMENT\_OFFER\_SLOT\_STATUS
- Changed Description

## APPOINTMENT OFFER VERBAL OR WRITTEN (RETIRED)\_ renamed from APPOINTMENT OFFER VERBAL OR WRITTEN

Change to Attribute: Changed status to Retired, Name, Description

This records whether the [APPOINTMENT OFFER](#) for a [SERVICE REQUEST](#) was made verbally or in writing to the [PATIENT](#). This item has been retired from the NHS Data Model and Dictionary.

When there is more than one [APPOINTMENT OFFER](#) for the same [SERVICE REQUEST](#), they should all be the same form of offer i.e. all verbal or all written. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Verbal includes any form of voice communication whether face to face via telephone or other communication media. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

Written includes any notification in writing whether communicated electronically, by post or by hand.

### National Codes:

- |    |               |
|----|---------------|
| 01 | Verbal offer  |
| 02 | Written offer |

## APPOINTMENT OFFER VERBAL OR WRITTEN (RETIRED)\_ renamed from APPOINTMENT OFFER VERBAL OR WRITTEN

Change to Attribute: Changed status to Retired, Name, Description

- Retired APPOINTMENT OFFER VERBAL OR WRITTEN
- Changed Name from Data\_Dictionary.Attributes.A.Ap.APPOINTMENT\_OFFER\_VERBAL\_OR\_WRITTEN to Retired.Data\_Dictionary.Attributes.A.APPOINTMENT\_OFFER\_VERBAL\_OR\_WRITTEN
- Changed Description

## APPOINTMENT SLOT STATUS (RETIRED)\_ renamed from APPOINTMENT SLOT STATUS

Change to Attribute: Changed status to Retired, Name, Description

The status of an [APPOINTMENT SLOT](#). This item has been retired from the NHS Data Model and Dictionary.

An [APPOINTMENT SLOT](#) can be booked to one [APPOINTMENT](#) or to more than one [APPOINTMENT](#) but it should be of one type only. The [APPOINTMENT SLOT TYPE](#) indicates the type of slot. This is to allow for a group of [PATIENTS](#) to share the same [APPOINTMENT SLOT](#) for group related care or therapy. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

For a slot which can be booked to more than one [APPOINTMENT](#), the [APPOINTMENT SLOT](#) can be allocated to one or more [APPOINTMENT OFFER](#). When an offer is accepted by, or on behalf of a [PATIENT](#) the slot becomes booked but still available for booking and allocation for any other offered appointment. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

[APPOINTMENT SLOT STATUS](#) should be used in conjunction with [APPOINTMENT SLOT TYPE](#) and [APPOINTMENT OFFER SLOT STATUS](#) to ensure correct allocation and booking of [APPOINTMENTS](#).

Any cancelled [APPOINTMENT SLOTS](#), the [APPOINTMENT SLOT STATUS](#) should revert to not booked or no longer available.

### National Codes:

- |    |  |
|----|--|
| 01 | Booked - single <a href="#">APPOINTMENT</a> only   |
| 02 | Booked - multiple <a href="#">APPOINTMENTS</a>   |
| 03 | Not booked - unallocated still available   |
| 04 | No longer available  |
| 05 | Reserved (eg for follow up appointments or urgent referrals)                                   |
| 06 | Allocated to one or more offered <a href="#">APPOINTMENTS</a> but none yet confirmed as booked |

## APPOINTMENT SLOT STATUS (RETIRED)\_ renamed from APPOINTMENT SLOT STATUS

Change to Attribute: Changed status to Retired, Name, Description

- Retired APPOINTMENT SLOT STATUS
- Changed Name from Data\_Dictionary.Attributes.A.Ap.APPOINTMENT\_SLOT\_STATUS to Retired.Data\_Dictionary.Attributes.A.APPOINTMENT\_SLOT\_STATUS
- Changed Description

## APPOINTMENT SLOT TYPE (RETIRED)\_ renamed from APPOINTMENT SLOT TYPE

Change to Attribute: Changed status to Retired, Name, Description

The type of an [APPOINTMENT SLOT](#). This item has been retired from the NHS Data Model and Dictionary.

[APPOINTMENT SLOT TYPE](#) should be used in conjunction with [APPOINTMENT SLOT STATUS](#) and [APPOINTMENT OFFER SLOT STATUS](#) to ensure correct allocation and booking of [APPOINTMENTS](#). The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

**National Codes:** Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

- |    |  |
|----|--|
| 01 | Single appointment booking for the slot only |
|----|--|

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**APPOINTMENT SLOT TYPE (RETIRED)\_ renamed from APPOINTMENT SLOT TYPE**


---

Change to Attribute: Changed status to Retired, Name, Description

- Retired APPOINTMENT SLOT TYPE
  - Changed Name from Data\_Dictionary.Attributes.A.Ap.APPOINTMENT\_SLOT\_TYPE to Retired.Data\_Dictionary.Attributes.A.APPOINTMENT\_SLOT\_TYPE
  - Changed Description
- 

**ELECTIVE ADMISSION EFFECTIVE WAIT START DATE (RETIRED)\_ renamed from ELECTIVE ADMISSION EFFECTIVE WAIT START DATE**


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Change to Attribute: Changed status to Retired, Name, Description

The ORIGINAL DECIDED TO ADMIT DATE should normally be the date used as the start point from which an effective waiting time for admission from an ELECTIVE ADMISSION LIST to a Hospital Provider Spelt is calculated. However, when a PATIENT refuses a reasonable OFFERED FOR ADMISSION DATE or cancels the admission or fails to arrive for admission, the point from which the effective waiting time is calculated changes. This item has been retired from the NHS Data Model and Dictionary.

To take account of PATIENT instigated resets, the ELECTIVE ADMISSION EFFECTIVE WAIT START DATE should be used as the start point from which the effective waiting time is calculated. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

When an ELECTIVE ADMISSION LIST ENTRY is created and recorded, the ELECTIVE ADMISSION EFFECTIVE WAIT START DATE should be initialised with the same date used to record the ORIGINAL DECIDED TO ADMIT DATE. Thereafter it should only change if and due to a PATIENT action which instigates a change to the point from which the effective waiting time should be re-calculated or a change to the ORIGINAL DECIDED TO ADMIT DATE. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

ELECTIVE ADMISSION EFFECTIVE WAIT START DATE should be changed and overwritten only when:

- a- the PATIENT refuses a reasonable admission date offer, this is a Self-Deferred Admission. The ELECTIVE ADMISSION EFFECTIVE WAIT START DATE should be overwritten with the earliest OFFERED FOR ADMISSION DATE. For a verbal admission offer, as indicated by OFFER OF ADMISSION VERBAL OR WRITTEN, to be deemed reasonable, the PATIENT should be offered a minimum of two OFFERED FOR ADMISSION DATES on different days with at least three weeks notice before the first OFFERED FOR ADMISSION DATE. OFFER OF ADMISSION GROUP IDENTIFIER should be the same for each individual OFFER OF ADMISSION within the set of the two or more offered dates. For a written appointment offer, as indicated by OFFER OF ADMISSION VERBAL OR WRITTEN, to be deemed reasonable, the PATIENT should be offered an OFFERED FOR ADMISSION DATE with a minimum of three weeks notice before admission. A written offer may comprise of only one offered date or a set of offered date
- or
- b- the PATIENT failed to arrive for admission, this is a Self-Deferred Admission. The ELECTIVE ADMISSION EFFECTIVE WAIT START DATE should be overwritten with the OFFERED FOR ADMISSION DATE the patient did not arrive to attend. ADMISSION OFFER OUTCOME records whether the PATIENT failed to arrive on the OFFERED FOR ADMISSION DATE
- or
- c- the admission was cancelled, by or on behalf of, the patient, this is a Self-Deferred Admission. The ELECTIVE ADMISSION EFFECTIVE WAIT START DATE should be overwritten with the OFFERED FOR ADMISSION DATE after that date has passed i.e. the next day. ADMISSION OFFER OUTCOME records whether the PATIENT cancelled and APPOINTMENT CANCELLED DATE records the date of cancellation
- or
- d- the PATIENT initiates transfer themselves to another Health Care Provider and remove themselves from the waiting list of their current provider then the waiting period will reset. The DECIDED TO ADMIT DATE of the new provider will be used to record the ORIGINAL DECIDED TO ADMIT DATE and re-initialise ELECTIVE ADMISSION EFFECTIVE WAIT START DATE accordingly.

Where two Health Care Providers agree to the transfer of a PATIENT for example to speed up treatment or provide continuity of care then this should not be treated as a PATIENT initiated transfer.

In these cases the ORIGINAL DECIDED TO ADMIT DATE and the ELECTIVE ADMISSION EFFECTIVE WAIT START DATE of the transferring provider will also become the initialised ORIGINAL DECIDED TO ADMIT DATE and the ELECTIVE ADMISSION EFFECTIVE WAIT START DATE of the new provider.

In addition, the WAITING PERIOD EXCLUSION will also be transferred to the new provider.

When two Health Care Providers merge the PATIENT elective admission details are retained and waiting times are unaffected.

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**ELECTIVE ADMISSION EFFECTIVE WAIT START DATE (RETIRED)\_ renamed from ELECTIVE ADMISSION EFFECTIVE WAIT START DATE**


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Change to Attribute: Changed status to Retired, Name, Description

- Retired ELECTIVE ADMISSION EFFECTIVE WAIT START DATE
  - Changed Name from Data\_Dictionary.Attributes.E.ELECTIVE\_ADMISSION\_EFFECTIVE\_WAIT\_START\_DATE to Retired.Data\_Dictionary.Attributes.E.ELECTIVE\_ADMISSION\_EFFECTIVE\_WAIT\_START\_DATE
  - Changed Description
- 

**FIRST ATTENDANCE EFFECTIVE WAIT START DATE (RETIRED)\_ renamed from FIRST ATTENDANCE EFFECTIVE WAIT START DATE**


---

Change to Attribute: Changed status to Retired, Name, Description

The ORIGINAL REFERRAL REQUEST RECEIVED DATE should normally be the date used as the start point from which an effective waiting time for a first

Out-Patient Appointment is calculated. However, when a PATIENT refuses a reasonable APPOINTMENT DATE OFFERED for a first APPOINTMENT or did not attend a first APPOINTMENT, the point from which the effective waiting time is calculated changes. This item has been retired from the NHS Data Model and Dictionary.

To take account of a PATIENT instigated resets, the FIRST ATTENDANCE EFFECTIVE WAIT START DATE should be used as the start point from which the effective waiting time is calculated. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

When a REFERRAL REQUEST is created and recorded, FIRST ATTENDANCE EFFECTIVE WAIT START DATE should be initialised with the same date used to record the ORIGINAL REFERRAL REQUEST RECEIVED DATE. Thereafter it should only change if and due to a PATIENT action which instigates a change to the point from which the effective waiting time should be calculated or a change to the ORIGINAL REFERRAL REQUEST RECEIVED DATE. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

FIRST ATTENDANCE EFFECTIVE WAIT START DATE should be updated when:

- or the PATIENT refuses a reasonable appointment offer. The FIRST ATTENDANCE EFFECTIVE WAIT START DATE should be overwritten with the earliest APPOINTMENT DATE OFFERED of the APPOINTMENT OFFERS for the SERVICE REQUEST.  
For a verbal appointment offer, as indicated by APPOINTMENT OFFER VERBAL OR WRITTEN, to be deemed reasonable, the PATIENT should be offered a minimum of two APPOINTMENT DATES OFFERED on different days with at least three weeks notice before the first APPOINTMENT DATE OFFERED.  
For a written appointment offer, as indicated by APPOINTMENT OFFER VERBAL OR WRITTEN, to be deemed reasonable, the PATIENT should be offered an APPOINTMENT DATE OFFERED with a minimum of three weeks notice before the first APPOINTMENT DATE OFFERED.
- or the PATIENT failed to attend the APPOINTMENT, whether giving advance notice or not, the FIRST ATTENDANCE EFFECTIVE WAIT START DATE should be overwritten with the APPOINTMENT DATE of the APPOINTMENT not attended  
ATTENDED OR DID NOT ATTEND records whether the PATIENT failed to attend
- or the PATIENT initiates transfer themselves to another Health Care Provider and remove themselves from the waiting list of their current provider then the waiting period will reset. The REFERRAL REQUEST RECEIVED DATE of the new provider will be used to record the ORIGINAL REFERRAL REQUEST RECEIVED DATE. This will exclude any period of wait before the transfer took place and re-initialise the FIRST ATTENDANCE EFFECTIVE WAIT START DATE accordingly.

#### FIRST ATTENDANCE EFFECTIVE WAIT START DATE (RETIRED) renamed from FIRST ATTENDANCE EFFECTIVE WAIT START DATE

Change to Attribute: Changed status to Retired, Name, Description

- Retired FIRST ATTENDANCE EFFECTIVE WAIT START DATE
- Changed Name from Data\_Dictionary.Attributes.F.FIRST\_ATTENDANCE\_EFFECTIVE\_WAIT\_START\_DATE to Retired.Data\_Dictionary.Attributes.F.FIRST\_ATTENDANCE\_EFFECTIVE\_WAIT\_START\_DATE
- Changed Description

#### OFFER OF ADMISSION ACCEPTED OR REFUSED (RETIRED) renamed from OFFER OF ADMISSION ACCEPTED OR REFUSED

Change to Attribute: Changed status to Retired, Name, Description

A record of whether or not the OFFERED FOR ADMISSION DATE of an OFFER OF ADMISSION was accepted by, or on behalf of the PATIENT. This item has been retired from the NHS Data Model and Dictionary.

The date on which OFFER OF ADMISSION was accepted by, or on behalf of the PATIENT should be recorded by the OFFER OF ADMISSION ACCEPTED DATE. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

**National Codes:** Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

- 1 Accepted
- 2 Refused

#### OFFER OF ADMISSION ACCEPTED OR REFUSED (RETIRED) renamed from OFFER OF ADMISSION ACCEPTED OR REFUSED

Change to Attribute: Changed status to Retired, Name, Description

- Retired OFFER OF ADMISSION ACCEPTED OR REFUSED
- Changed Name from Data\_Dictionary.Attributes.O.OFFER\_OF\_ADMISSION\_ACCEPTED\_OR\_REFUSED to Retired.Data\_Dictionary.Attributes.O.OFFER\_OF\_ADMISSION\_ACCEPTED\_OR\_REFUSED
- Changed Description

#### OFFER OF ADMISSION VERBAL OR WRITTEN (RETIRED) renamed from OFFER OF ADMISSION VERBAL OR WRITTEN

Change to Attribute: Changed status to Retired, Name, Description

This records whether the OFFER OF ADMISSION for an ELECTIVE ADMISSION LIST ENTRY was made verbally or in writing to the PATIENT. This item has been retired from the NHS Data Model and Dictionary.

When there is more than one OFFER OF ADMISSION with the same OFFER OF ADMISSION GROUP IDENTIFIER for the same ELECTIVE ADMISSION LIST ENTRY, they should all be the same form of offer i.e. all verbal or all written. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Verbal includes any form of voice communication whether face to face via telephone or other communication media. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

Written includes any notification in writing whether communicated electronically, by post or by hand.

#### National Codes:

01	Verbal offer
02	Written offer

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#### OFFER OF ADMISSION VERBAL OR WRITTEN (RETIRED)\_ renamed from OFFER OF ADMISSION VERBAL OR WRITTEN

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Change to Attribute: Changed status to Retired, Name, Description

- Retired OFFER OF ADMISSION VERBAL OR WRITTEN
- Changed Name from Data\_Dictionary.Attributes.O.OFFER\_OF\_ADMISSION\_VERBAL\_OR\_WRITTEN to Retired.Data\_Dictionary.Attributes.O.OFFER\_OF\_ADMISSION\_VERBAL\_OR\_WRITTEN
- Changed Description

---

#### ORGANISATION SITE TREATMENT CENTRE (RETIRED)\_ renamed from ORGANISATION SITE TREATMENT CENTRE

---

Change to Attribute: Changed status to Retired, Name, Description

~~This indicates whether or not an [ORGANISATION SITE](#) is a Treatment Centre.~~

~~It is necessary to monitor care delivered by the NHS and Independent Sector Treatment Centres and be able to differentiate it from other [CARE ACTIVITY](#) provided to NHS [PATIENTS](#). Treatment Centres whether NHS or Independent Sector, should be registered as individual [ORGANISATION SITES](#) with the [Organisation Data Service](#). This item has been retired from the NHS Data Model and Dictionary.~~

~~**National Codes:** The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.~~

1	Not a Treatment Centre
2	NHS Treatment Centre
3	Independent Sector Treatment Centre

~~Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.~~

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#### ORGANISATION SITE TREATMENT CENTRE (RETIRED)\_ renamed from ORGANISATION SITE TREATMENT CENTRE

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Change to Attribute: Changed status to Retired, Name, Description

- Retired ORGANISATION SITE TREATMENT CENTRE
- Changed Name from Data\_Dictionary.Attributes.O.Org.ORGANISATION\_SITE\_TREATMENT\_CENTRE to Retired.Data\_Dictionary.Attributes.O.ORGANISATION\_SITE\_TREATMENT\_CENTRE
- Changed Description

---

#### UNIQUE BOOKING REFERENCE NUMBER (CONVERTED)

---

Change to Attribute: Changed Description

The unique booking reference number assigned by the [Choose and Book](#) system when a [PATIENT](#) accepts an [APPOINTMENT DATE OFFERED](#) of an [APPOINTMENT OFFER](#) where the offer was made via the [Choose and Book](#) system.

When a [PATIENT](#) accepts an [APPOINTMENT DATE OFFERED](#), the unique booking reference number issued and used during the booking process is considered to be 'converted' i.e. an [APPOINTMENT](#) has been created and recorded; and the [PATIENT](#) has been placed on an [Out-Patient Waiting List](#) even if subsequently the [PATIENT](#) does not attend or cancels the [APPOINTMENT](#).

~~[APPOINTMENT BOOKING SYSTEM TYPE](#) of the [APPOINTMENT](#) records the type of booking system used and [UNIQUE BOOKING REFERENCE NUMBER \(CONVERTED\)](#) should only be recorded where the type of booking system is the [Choose and Book](#) system. [UNIQUE BOOKING REFERENCE NUMBER \(CONVERTED\)](#) should only be recorded where the type of booking system is the [Choose and Book](#) system.~~

---

#### WRITTEN REFERRAL REQUEST INDICATOR (RETIRED)\_ renamed from WRITTEN REFERRAL REQUEST INDICATOR

---

Change to Attribute: Changed status to Retired, Name, Description

~~An indication of whether a referral is written. An electronic message should be counted as written, as should a verbal request which is subsequently confirmed by a written request. This item has been retired from the NHS Data Model and Dictionary.~~

~~**Classification:** The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.~~

01	Yes
02	No

~~Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.~~

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#### WRITTEN REFERRAL REQUEST INDICATOR (RETIRED)\_ renamed from WRITTEN REFERRAL REQUEST INDICATOR

---

Change to Attribute: Changed status to Retired, Name, Description

- Retired WRITTEN REFERRAL REQUEST INDICATOR
- Changed Name from Data\_Dictionary.Attributes.W.Ward.WRITTEN\_REFERRAL\_REQUEST\_INDICATOR to

- Retired.Data\_Dictionary.Attributes.W.WRITTEN\_REFERRAL\_REQUEST\_INDICATOR
- Changed Description

#### ADMISSION INTENDED PROCEDURE (RETIRED)\_ renamed from ADMISSION INTENDED PROCEDURE

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n4
HES item:	
National Codes:	
Default Codes:	

#### Notes:

This is the code value list of [OPCS-4](#) codes used to: This item has been retired from the NHS Data Model and Dictionary.

- monitor specific targets (0001 and 0002), i.e. the "Patients waiting longer than three months (13 weeks) for revascularisation" target and
- monitor waiting times (0003 and 0004) for other cardiovascular related procedures that are not specifically included in the target above.

The groupings are based upon specified [OPCS-4](#) codes as recorded by the [CLINICAL CLASSIFICATION CODE](#) of the [CLINICAL CLASSIFICATION](#) which is an [OPERATIVE PROCEDURE](#) for the [PLANNED ACTIVITY](#) of an [ELECTIVE ADMISSION LIST ENTRY](#) for a [PATIENT](#) being admitted electively. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

When the [OPCS-4](#) code of the [OPERATIVE PROCEDURE](#) is within the range of the specified [ADMISSION INTENDED PROCEDURE](#) for the sub group within the data set, the [PATIENT](#) should be included in the count providing all the other criteria of the count are also met. Access to this version can be obtained by emailing [information\\_standards@hscic.gov.uk](mailto:information_standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

An [Intended Patient Procedure](#) is a [PLANNED ACTIVITY](#) where [PLANNED ACTIVITY TYPE](#) is National Code 04 "Intended Patient Procedure".

#### Permitted National Codes:

	<a href="#">OPCS-4</a> codes
0001	CABG – Coronary Artery Bypass Graft Code Range: K40. – Saphenous vein graft replacement of coronary artery K41. – Other autograft replacement of coronary artery K42. – Allograft replacement of coronary artery K43. – Prosthetic replacement of coronary artery K44. – Other replacement of coronary artery K45. – Connection of thoracic artery to coronary artery K46. – Other bypass of coronary artery
0002	PTCA – Percutaneous Transluminal Coronary Angioplasty Coding Range: K49. – Transluminal balloon angioplasty of coronary artery <i>Excludes: Percutaneous transluminal balloon angioplasty and insertion of stent into coronary artery (K75)</i> K50.1 Percutaneous transluminal laser coronary angioplasty K75. – Percutaneous transluminal balloon angioplasty and insertion of stent into coronary artery <i>Excludes: Transluminal balloon angioplasty of coronary artery (K49)</i>
0003	Valves Coding Range <i>Open</i> K25. – Plastic repair of mitral valve K26. – Plastic repair of aortic valve K27. – Plastic repair of tricuspid valve K28. – Plastic repair of pulmonary valve K29. – Plastic repair of unspecified valve of heart K30. – Revision of plastic repair of valve of heart K31. – Open incision of valve of heart K34. – Other open operations on valve of heart <i>Closed</i> K32. – Closed incision of valve of heart <i>Therapeutic transluminal</i> K35. – Therapeutic transluminal operations on valve of heart
0004	Angiography Coding Range K63. – Contrast radiology of heart K65. – Catheterisation of heart

#### ADMISSION INTENDED PROCEDURE (RETIRED)\_ renamed from ADMISSION INTENDED PROCEDURE

Change to Data Element: Changed status to Retired, Name, Description

- Retired ADMISSION INTENDED PROCEDURE
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.A.Ad.ADMISSION\_INTENDED\_PROCEDURE to Retired.Data\_Dictionary.Data\_Field\_Notes.A.ADMISSION\_INTENDED\_PROCEDURE
- Changed Description

#### ADMITTED PATIENT ELECTIVE ADMISSIONS (DAY CASE) (RETIRED)\_ renamed from ADMITTED PATIENT ELECTIVE ADMISSIONS (DAY CASE)

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

#### Notes:

This is a subset of [ADMITTED PATIENT ELECTIVE ADMISSIONS](#) of all the day case admissions within the [REPORTING PERIOD](#). That is where the [PATIENT CLASSIFICATION](#) for the [Hospital Provider Spell](#) [ACTIVITY GROUP](#) is National Code 2 "Day case admission". This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.



Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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#### ADMITTED PATIENT ELECTIVE ADMISSIONS (DAY CASE) (RETIRED)\_ renamed from ADMITTED PATIENT ELECTIVE ADMISSIONS (DAY CASE)

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Change to Data Element: Changed status to Retired, Name, Description

- Retired ADMITTED PATIENT ELECTIVE ADMISSIONS (DAY CASE)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.A.Ad.ADMITTED\_PATIENT\_ELECTIVE\_ADMISSIONS\_(DAY\_CASE) to Retired.Data\_Dictionary.Data\_Field\_Notes.A.ADMITTED\_PATIENT\_ELECTIVE\_ADMISSIONS\_(DAY\_CASE)
- Changed Description

---

#### ADMITTED PATIENT ELECTIVE ADMISSIONS (IS TREATMENT CENTRES) (RETIRED)\_ renamed from ADMITTED PATIENT ELECTIVE ADMISSIONS (IS TREATMENT CENTRES)

---

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

##### Notes:

This is a subset of [ADMITTED PATIENT ELECTIVE ADMISSIONS](#) of all the admissions to an Independent Sector Treatment Centre as day case admissions or ordinary admissions within the [REPORTING PERIOD](#). That is where the [ADMINISTRATIVE CATEGORY CODE](#) current at the [START DATE](#) of the [Hospital Provider Spell](#) is National Code 01 'NHS patient' and the [ORGANISATION SITE TREATMENT CENTRE](#) of [ORGANISATION SITE](#) is National Code 3 'Independent Sector Treatment Centre'. This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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#### ADMITTED PATIENT ELECTIVE ADMISSIONS (IS TREATMENT CENTRES) (RETIRED)\_ renamed from ADMITTED PATIENT ELECTIVE ADMISSIONS (IS TREATMENT CENTRES)

---

Change to Data Element: Changed status to Retired, Name, Description

- Retired ADMITTED PATIENT ELECTIVE ADMISSIONS (IS TREATMENT CENTRES)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.A.Ad.ADMITTED\_PATIENT\_ELECTIVE\_ADMISSIONS\_(IS\_TREATMENT\_CENTRES) to Retired.Data\_Dictionary.Data\_Field\_Notes.A.ADMITTED\_PATIENT\_ELECTIVE\_ADMISSIONS\_(IS\_TREATMENT\_CENTRES)
- Changed Description

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#### ADMITTED PATIENT ELECTIVE ADMISSIONS (NHS TREATMENT CENTRES) (RETIRED)\_ renamed from ADMITTED PATIENT ELECTIVE ADMISSIONS (NHS TREATMENT CENTRES)

---

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

##### Notes:

This is a subset of [ADMITTED PATIENT ELECTIVE ADMISSIONS](#) of all the admissions in an NHS Treatment Centre as day case admissions or ordinary admissions within the [REPORTING PERIOD](#) where the [ORGANISATION SITE TREATMENT CENTRE](#) of [ORGANISATION SITE](#) is National Code 2 'NHS Treatment Centre'. This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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#### ADMITTED PATIENT ELECTIVE ADMISSIONS (NHS TREATMENT CENTRES) (RETIRED)\_ renamed from ADMITTED PATIENT ELECTIVE ADMISSIONS (NHS TREATMENT CENTRES)

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Change to Data Element: Changed status to Retired, Name, Description

- Retired ADMITTED PATIENT ELECTIVE ADMISSIONS (NHS TREATMENT CENTRES)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.A.Ad.ADMITTED\_PATIENT\_ELECTIVE\_ADMISSIONS\_(NHS\_TREATMENT\_CENTRES) to Retired.Data\_Dictionary.Data\_Field\_Notes.A.ADMITTED\_PATIENT\_ELECTIVE\_ADMISSIONS\_(NHS\_TREATMENT\_CENTRES)
- Changed Description

---

#### ADMITTED PATIENT ELECTIVE ADMISSIONS (ORDINARY) (RETIRED)\_ renamed from ADMITTED PATIENT ELECTIVE ADMISSIONS (ORDINARY)

---

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

**Notes:**

This is a subset of ADMITTED PATIENT ELECTIVE ADMISSIONS of all the ordinary admissions within the REPORTING PERIOD. That is where the PATIENT CLASSIFICATION for the Hospital Provider Spell ACTIVITY GROUP is National Code 1 'Ordinary admission'. This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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#### ADMITTED PATIENT ELECTIVE ADMISSIONS (ORDINARY) (RETIRED)\_ renamed from ADMITTED PATIENT ELECTIVE ADMISSIONS (ORDINARY)

Change to Data Element: Changed status to Retired, Name, Description

- Retired ADMITTED PATIENT ELECTIVE ADMISSIONS (ORDINARY)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.A.Ad.ADMITTED\_PATIENT\_ELECTIVE\_ADMISSIONS\_(ORDINARY) to Retired.Data\_Dictionary.Data\_Field\_Notes.A.ADMITTED\_PATIENT\_ELECTIVE\_ADMISSIONS\_(ORDINARY)
- Changed Description

---

#### ADMITTED PATIENT ELECTIVE ADMISSIONS (PLANNED) (RETIRED)\_ renamed from ADMITTED PATIENT ELECTIVE ADMISSIONS (PLANNED)

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

**Notes:**

This is a subset of ADMITTED PATIENT ELECTIVE ADMISSIONS of all the planned admissions within the REPORTING PERIOD. That is where the ADMISSION METHOD of the Hospital Provider Spell ACTIVITY GROUP is National Code 13 'Planned'. This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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#### ADMITTED PATIENT ELECTIVE ADMISSIONS (PLANNED) (RETIRED)\_ renamed from ADMITTED PATIENT ELECTIVE ADMISSIONS (PLANNED)

Change to Data Element: Changed status to Retired, Name, Description

- Retired ADMITTED PATIENT ELECTIVE ADMISSIONS (PLANNED)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.A.Ad.ADMITTED\_PATIENT\_ELECTIVE\_ADMISSIONS\_(PLANNED) to Retired.Data\_Dictionary.Data\_Field\_Notes.A.ADMITTED\_PATIENT\_ELECTIVE\_ADMISSIONS\_(PLANNED)
- Changed Description

---

#### ADMITTED PATIENT NHS ADMISSIONS (RETIRED)\_ renamed from ADMITTED PATIENT NHS ADMISSIONS

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

**Notes:**

This is the number of NHS PATIENTS admitted to a Hospital Provider Spell of an NHS provider within the REPORTING PERIOD for planned treatment activity for a particular ADMISSION INTENDED PROCEDURE. This item has been retired from the NHS Data Model and Dictionary.

That is where the ORGANISATION TYPE of the Health Care Provider ORGANISATION is classification c 'NHS Trust' or x 'Primary Care Trust' and the OPCS-4 code as recorded by the CLINICAL CLASSIFICATION CODE of the OPERATIVE PROCEDURE is within the group range of ADMISSION INTENDED PROCEDURE. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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#### ADMITTED PATIENT NHS ADMISSIONS (RETIRED)\_ renamed from ADMITTED PATIENT NHS ADMISSIONS

Change to Data Element: Changed status to Retired, Name, Description

- Retired ADMITTED PATIENT NHS ADMISSIONS
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.A.Ad.ADMITTED\_PATIENT\_NHS\_ADMISSIONS to Retired.Data\_Dictionary.Data\_Field\_Notes.A.ADMITTED\_PATIENT\_NHS\_ADMISSIONS
- Changed Description

#### ADMITTED PATIENT NON-NHS ADMISSIONS (RETIRED)\_ renamed from ADMITTED PATIENT NON-NHS ADMISSIONS

Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	n10
HES Item:	
National Codes:	
Default Codes:	

#### Notes:

This is the number of NHS PATIENTS admitted to a Hospital Provider Spell of a registered or unregistered non-NHS provider ORGANISATION within the REPORTING PERIOD for planned treatment activity for a particular ADMISSION INTENDED PROCEDURE.

That is where the ORGANISATION TYPE of the Health Care Provider ORGANISATION is classification q: 'Registered non-NHS Provider' or r: 'Unregistered non-NHS Provider (except Local Authority)' and the ADMINISTRATIVE CATEGORY CODE current at the START DATE of the Hospital Provider Spell is National Code 01 'NHS patient' and the OPCS-4 code as recorded by the CLINICAL CLASSIFICATION CODE of the OPERATIVE PROCEDURE is within the group range of ADMISSION INTENDED PROCEDURE. This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

#### ADMITTED PATIENT NON-NHS ADMISSIONS (RETIRED)\_ renamed from ADMITTED PATIENT NON-NHS ADMISSIONS

Change to Data Element: Changed status to Retired, Name, Description

- Retired ADMITTED PATIENT NON-NHS ADMISSIONS
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.A.Ad.ADMITTED\_PATIENT\_NON-NHS\_ADMISSIONS to Retired.Data\_Dictionary.Data\_Field\_Notes.A.ADMITTED\_PATIENT\_NON-NHS\_ADMISSIONS
- Changed Description

#### ADMITTED PATIENT TOTAL NON-ELECTIVE ADMISSIONS (RETIRED)\_ renamed from ADMITTED PATIENT TOTAL NON-ELECTIVE ADMISSIONS

Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	n10
HES item:	
National Codes:	
Default Codes:	

#### Notes:

The total number of PATIENTS admitted non-electively to a Hospital Provider Spell of a NHS provider within the REPORTING PERIOD. This includes PATIENTS who have been admitted and then are subsequently sent home without treatment.

It includes private PATIENTS and PATIENTS who are Overseas Visitors. This item has been retired from the NHS Data Model and Dictionary.

It is the total of number of non-elective admissions for PATIENTS where: The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

a. the ORGANISATION TYPE of the Health Care Provider ORGANISATION is classification c 'NHS Trust' or x 'Primary Care Trust'

and

b. the ADMISSION METHOD of the Hospital Provider Spell ACTIVITY GROUP is National Code:

21, 22, 23 24 or 20 'Emergency admission, when admission is unpredictable and at short notice because of clinical need' see ADMISSION METHOD for definition of each code within this grouping

or 34 or 32 'Maternity admission, of a pregnant or recently pregnant woman to a maternity ward (including delivery facilities) except when the intention is to terminate the pregnancy' see ADMISSION METHOD for definition of each code within this grouping

or 01, 02 or 03 'Other admission' see ADMISSION METHOD for definition of each code within this grouping

and

c. the ACTIVITY DATE of the Hospital Provider Spell ACTIVITY GROUP recording the START DATE of the Hospital Provider Spell is within the period of the REPORTING PERIOD START DATE and the REPORTING PERIOD END DATE.

Within the REPORTING PERIOD includes where the DATE is the same as the START DATE or END DATE.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

#### ADMITTED PATIENT TOTAL NON-ELECTIVE ADMISSIONS (RETIRED)\_ renamed from ADMITTED PATIENT TOTAL NON-ELECTIVE ADMISSIONS

Change to Data Element: Changed status to Retired, Name, Description

- Retired ADMITTED PATIENT TOTAL NON-ELECTIVE ADMISSIONS
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.A.Ad.ADMITTED\_PATIENT\_TOTAL\_NON-ELECTIVE\_ADMISSIONS to Retired.Data\_Dictionary.Data\_Field\_Notes.A.ADMITTED\_PATIENT\_TOTAL\_NON-ELECTIVE\_ADMISSIONS
- Changed Description

#### COMMISSIONER OR PROVIDER STATUS INDICATOR (RETIRED)\_ renamed from COMMISSIONER OR PROVIDER STATUS

## INDICATOR

Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	m2
HES Item:	
National Codes:	
Default Codes:	

### Notes:

~~COMMISSIONER OR PROVIDER STATUS INDICATOR~~ indicates whether a Central Information Requirement Data Set and the data it contains is a submission from the ~~ORGANISATION~~ in the role of commissioner of care or provider of care.

~~Permitted National Codes:~~ This item has been retired from the NHS Data Model and Dictionary.

- 01 Commissioner submission
- 02 Provider submission

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## COMMISSIONER OR PROVIDER STATUS INDICATOR (RETIRED)\_ renamed from COMMISSIONER OR PROVIDER STATUS INDICATOR

Change to Data Element: Changed status to Retired, Name, Description

- Retired COMMISSIONER OR PROVIDER STATUS INDICATOR
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.C.Co.COMMISSIONER\_OR\_PROVIDER\_STATUS\_INDICATOR to Retired.Data\_Dictionary.Data\_Field\_Notes.C.COMMISSIONER\_OR\_PROVIDER\_STATUS\_INDICATOR
- Changed Description

## DATA SET PREPARATION DATE (RETIRED)\_ renamed from DATA SET PREPARATION DATE

Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	See <a href="#">DATE</a>
HES Item:	
National Codes:	
Default Codes:	

### Notes:

~~DATA SET PREPARATION DATE~~ in conjunction with ~~DATA SET PREPARATION TIME~~, ~~DATE~~ and ~~TIME~~ stamps when the data reported within the data set was extracted, prepared and recorded within the data set.

~~This DATE may be different to the actual submission DATE of the data set.~~ This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## DATA SET PREPARATION DATE (RETIRED)\_ renamed from DATA SET PREPARATION DATE

Change to Data Element: Changed status to Retired, Name, Description

- Retired DATA SET PREPARATION DATE
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.D.DATA\_SET\_PREPARATION\_DATE to Retired.Data\_Dictionary.Data\_Field\_Notes.D.DATA\_SET\_PREPARATION\_DATE
- Changed Description

## DATA SET PREPARATION TIME (RETIRED)\_ renamed from DATA SET PREPARATION TIME

Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	See <a href="#">TIME</a>
HES Item:	
National Codes:	
Default Codes:	

### Notes:

~~DATA SET PREPARATION TIME~~ in conjunction with ~~DATA SET PREPARATION DATE~~, ~~DATE~~ and ~~TIME~~ stamps when the data reported within the data set was extracted, prepared and recorded within the data set.

~~This DATE may be different to the actual submission DATE of the data set.~~ This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## DATA SET PREPARATION TIME (RETIRED)\_ renamed from DATA SET PREPARATION TIME

Change to Data Element: Changed status to Retired, Name, Description

- Retired DATA SET PREPARATION TIME
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.D.DATA\_SET\_PREPARATION\_TIME to Retired.Data\_Dictionary.Data\_Field\_Notes.D.DATA\_SET\_PREPARATION\_TIME
- Changed Description

## DECISIONS TO ADMIT (BOOKED DAY CASE) (RETIRED)\_ renamed from DECISIONS TO ADMIT (BOOKED DAY CASE)

Change to Data Element: Changed status to Retired, Name, Description

Format/length: n10  
HES item:  
National Codes:  
Default Codes:

### Notes:

The [DECISIONS TO ADMIT NUMBER](#) where the [ELECTIVE ADMISSION TYPE](#) is National Code 12 'Booked admission' and the [PATIENT CLASSIFICATION](#) for the [ELECTIVE ADMISSION LIST ENTRY](#) is National Code 2 'Day case admission'. This item has been retired from the NHS Data Model and Dictionary.

It excludes [DECISIONS TO ADMIT](#) for planned and waiting list admissions. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## DECISIONS TO ADMIT (BOOKED DAY CASE) (RETIRED)\_ renamed from DECISIONS TO ADMIT (BOOKED DAY CASE)

Change to Data Element: Changed status to Retired, Name, Description

- Retired DECISIONS TO ADMIT (BOOKED DAY CASE)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.D.Dea.DECISIONS\_TO\_ADMIT\_(BOOKED\_DAY\_CASE) to Retired.Data\_Dictionary.Data\_Field\_Notes.D.DECISIONS\_TO\_ADMIT\_(BOOKED\_DAY\_CASE)
- Changed Description

## DECISIONS TO ADMIT (BOOKED ORDINARY) (RETIRED)\_ renamed from DECISIONS TO ADMIT (BOOKED ORDINARY)

Change to Data Element: Changed status to Retired, Name, Description

Format/length: n10  
HES item:  
National Codes:  
Default Codes:

### Notes:

The [DECISIONS TO ADMIT NUMBER](#) [ELECTIVE ADMISSION TYPE](#) is National Code 12 'Booked admission' and the [PATIENT CLASSIFICATION](#) for the [ELECTIVE ADMISSION LIST ENTRY](#) is National Code 1 'Ordinary admission'. This item has been retired from the NHS Data Model and Dictionary.

It excludes [DECISIONS TO ADMIT](#) for planned and waiting list admissions. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## DECISIONS TO ADMIT (BOOKED ORDINARY) (RETIRED)\_ renamed from DECISIONS TO ADMIT (BOOKED ORDINARY)

Change to Data Element: Changed status to Retired, Name, Description

- Retired DECISIONS TO ADMIT (BOOKED ORDINARY)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.D.Dea.DECISIONS\_TO\_ADMIT\_(BOOKED\_ORDINARY) to Retired.Data\_Dictionary.Data\_Field\_Notes.D.DECISIONS\_TO\_ADMIT\_(BOOKED\_ORDINARY)
- Changed Description

## DECISIONS TO ADMIT (DAY CASE) (RETIRED)\_ renamed from DECISIONS TO ADMIT (DAY CASE)

Change to Data Element: Changed status to Retired, Name, Description

Format/length: n10  
HES item:  
National Codes:  
Default Codes:

### Notes:

The [DECISIONS TO ADMIT NUMBER](#) where the [ELECTIVE ADMISSION TYPE](#) is National Code 11 'Waiting list admission' or 12 'Booked admission' and the [PATIENT CLASSIFICATION](#) for the [ELECTIVE ADMISSION LIST ENTRY](#) is National Code 2 'Day case admission'. This item has been retired from the NHS Data Model and Dictionary.

It excludes [DECISIONS TO ADMIT](#) for planned admissions. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

#### DECISIONS TO ADMIT (DAY CASE) (RETIRED)\_ renamed from DECISIONS TO ADMIT (DAY CASE)

Change to Data Element: Changed status to Retired, Name, Description

- Retired DECISIONS TO ADMIT (DAY CASE)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.D.Dea.DECISIONS\_TO\_ADMIT\_(DAY\_CASE) to Retired.Data\_Dictionary.Data\_Field\_Notes.D.DECISIONS\_TO\_ADMIT\_(DAY\_CASE)
- Changed Description

#### DECISIONS TO ADMIT (ORDINARY) (RETIRED)\_ renamed from DECISIONS TO ADMIT (ORDINARY)

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

##### Notes:

The [DECISIONS TO ADMIT NUMBER](#) where the [ELECTIVE ADMISSION TYPE](#) is National Code 11 'Waiting list admission' or 12 'Booked admission' and the [PATIENT CLASSIFICATION](#) for the [ELECTIVE ADMISSION LIST ENTRY](#) is National Code 1 'Ordinary admission'. This item has been retired from the NHS Data Model and Dictionary.

It excludes [DECISIONS TO ADMIT](#) for planned admissions. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

#### DECISIONS TO ADMIT (ORDINARY) (RETIRED)\_ renamed from DECISIONS TO ADMIT (ORDINARY)

Change to Data Element: Changed status to Retired, Name, Description

- Retired DECISIONS TO ADMIT (ORDINARY)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.D.Dea.DECISIONS\_TO\_ADMIT\_(ORDINARY) to Retired.Data\_Dictionary.Data\_Field\_Notes.D.DECISIONS\_TO\_ADMIT\_(ORDINARY)
- Changed Description

#### DECISIONS TO ADMIT NUMBER (RETIRED)\_ renamed from DECISIONS TO ADMIT NUMBER

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

##### Notes:

The total number of [DECISIONS TO ADMIT](#) taken within the [REPORTING PERIOD](#) for [PATIENTS](#) to be placed on [ELECTIVE ADMISSION LIST](#) for admission to a [Hospital Provider Spell](#). It includes private [PATIENTS](#) and [PATIENTS](#) who are [Overseas Visitors](#). This item has been retired from the NHS Data Model and Dictionary.

It is the total of number of such [DECISIONS TO ADMIT](#) where. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

- the [DECIDED TO ADMIT DATE](#) of the [ELECTIVE ADMISSION LIST ENTRIES](#) is within the period of the [REPORTING PERIOD START DATE](#) and the [REPORTING PERIOD END DATE](#).
- Within the [REPORTING PERIOD](#) includes where the date is the same as the start date or end date

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

#### DECISIONS TO ADMIT NUMBER (RETIRED)\_ renamed from DECISIONS TO ADMIT NUMBER

Change to Data Element: Changed status to Retired, Name, Description

- Retired DECISIONS TO ADMIT NUMBER
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.D.Dea.DECISIONS\_TO\_ADMIT\_NUMBER to Retired.Data\_Dictionary.Data\_Field\_Notes.D.DECISIONS\_TO\_ADMIT\_NUMBER
- Changed Description

#### DEFERRED ADMISSIONS (DAY CASE) (RETIRED)\_ renamed from DEFERRED ADMISSIONS (DAY CASE)

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
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HES Item:  
National Codes:  
Default Codes:

**Notes:**

This is the same as [DEFERRED ADMISSIONS \(ORDINARY\)](#) except that the specified [PATIENT CLASSIFICATION](#) is 'day case'. This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## DEFERRED ADMISSIONS (DAY CASE) (RETIRED)\_ renamed from DEFERRED ADMISSIONS (DAY CASE)

Change to Data Element: Changed status to Retired, Name, Description

- Retired DEFERRED ADMISSIONS (DAY CASE)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.D.Dea.DEFERRED\_ADMISSIONS\_(DAY\_CASE) to Retired.Data\_Dictionary.Data\_Field\_Notes.D.DEFERRED\_ADMISSIONS\_(DAY\_CASE)
- Changed Description

## DEFERRED ADMISSIONS (ORDINARY) (RETIRED)\_ renamed from DEFERRED ADMISSIONS (ORDINARY)

Change to Data Element: Changed status to Retired, Name, Description

Format/Length: n10  
HES Item:  
National Codes:  
Default Codes:

**Notes:**

[DEFERRED ADMISSIONS \(ORDINARY\)](#) is the total number of [PATIENTS](#) classified as booked admissions or [WAITING LIST](#) admissions, who have an [OFFER OF ADMISSION MADE DATE](#) recorded before or on the [REPORTING PERIOD END DATE](#) and are still waiting to be admitted from an [ELECTIVE ADMISSION LIST](#) to a Hospital Provider Spell for the specified [PATIENT CLASSIFICATION](#) of 'Ordinary admission' due to [Self-Deferred Admission](#).

This includes [Self-Deferred Admission](#) [PATIENTS](#) where the [OFFERED FOR ADMISSION DATE](#) has passed by the end of the [REPORTING PERIOD](#). This item has been retired from the NHS Data Model and Dictionary.

It excludes [Self-Deferred Admission](#) [PATIENTS](#) where the [OFFERED FOR ADMISSION DATE](#) has not passed by the end of the [REPORTING PERIOD](#), private [PATIENTS](#), [PATIENTS](#) who are [Overseas Visitors](#), elective planned admissions and [Suspended Patients](#). The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

It is the total of number of [Self-Deferred Admission](#) [PATIENTS](#) with an [OFFERED FOR ADMISSION DATE](#) still waiting admission where Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

- a. no [ELECTIVE ADMISSION LIST REMOVAL REASON](#) and [ELECTIVE ADMISSION LIST REMOVAL DATE](#) is recorded i.e. the [PATIENT](#) is still waiting for admission on the [WAITING LIST](#)  
or  
if recorded, [ELECTIVE ADMISSION LIST REMOVAL DATE](#) is after the [REPORTING PERIOD END DATE](#) i.e. the [PATIENT](#) was waiting for admission on the [WAITING LIST](#) as at the end of the [REPORTING PERIOD](#) and should therefore be included in the count
- and
- b. an [OFFERED FOR ADMISSION DATE](#) of an [OFFER OF ADMISSION](#) is recorded where the [OFFER OF ADMISSION MADE DATE](#) is before or on the [REPORTING PERIOD END DATE](#)  
Where more than one [OFFER OF ADMISSION](#) is recorded due to [PATIENT Self-Deferred Admission](#), at least one should have an [OFFERED FOR ADMISSION DATE](#) before or on the [REPORTING PERIOD END DATE](#) even if it is not the latest offer made  
and  
the latest [OFFER OF ADMISSION](#) made, the one with the latest [OFFER OF ADMISSION MADE DATE](#), is before or on the [REPORTING PERIOD END DATE](#) i.e. exclude from the count if the latest offer was made after the end of the [REPORTING PERIOD](#)
- and
- c. no [ELECTIVE ADMISSION SUSPENSION DETAIL](#) has been recorded  
or  
if recorded, the [LIST SUSPENSION START DATE](#) is before the [REPORTING PERIOD END DATE](#) and the [LIST SUSPENSION END DATE](#) is before the [REPORTING PERIOD END DATE](#) i.e. no period of suspension is still on-going as at the end of the [REPORTING PERIOD](#).  
Where no [LIST SUSPENSION END DATE](#) has been recorded or where the [LIST SUSPENSION END DATE](#) is on or after the [REPORTING PERIOD END DATE](#) then the period of suspension is still active and the [PATIENT](#) should be excluded from the count
- and
- d. [ADMINISTRATIVE CATEGORY CODE](#) of the [ADMINISTRATIVE CATEGORY](#) for the [ELECTIVE ADMISSION LIST ENTRY](#) is National Code 'NHS PATIENT', including [Overseas Visitors](#) charged under the [National Health Service \(Overseas Visitors Hospital Charging Regulations\)](#)  
and  
no [OVERSEAS VISITOR STATUS](#) is recorded for the [ELECTIVE ADMISSION LIST ENTRY](#)
- and
- e. the [ELECTIVE ADMISSION EFFECTIVE WAIT START DATE](#) is different to the [ORIGINAL DECIDED TO ADMIT DATE](#)  
and  
the [ELECTIVE ADMISSION EFFECTIVE WAIT START DATE](#) is before or on the [REPORTING PERIOD END DATE](#)
- and
- f. the [ELECTIVE ADMISSION TYPE](#) is National Code 11 'Waiting list admission' or 12 'Booked admission'
- and
- g. the [PATIENT CLASSIFICATION](#) is National Code 1 'Ordinary admission'

Where no [Self-Deferred Admission](#) [PATIENTS](#) waiting for admissions match the above criteria, a zero value should be recorded.

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## DEFERRED ADMISSIONS (ORDINARY) (RETIRED)\_ renamed from DEFERRED ADMISSIONS (ORDINARY)

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Change to Data Element: Changed status to Retired, Name, Description

- Retired DEFERRED ADMISSIONS (ORDINARY)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.D.Dea.DEFERRED\_ADMISSIONS\_(ORDINARY) to Retired.Data\_Dictionary.Data\_Field\_Notes.D.DEFERRED\_ADMISSIONS\_(ORDINARY)
- Changed Description

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## GP WRITTEN REFERRALS (RETIRED)\_ renamed from GP WRITTEN REFERRALS

---

Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	n10
HES Item:	
National Codes:	
Default Codes:	

### Notes:

~~GP WRITTEN REFERRALS is the total number of GENERAL PRACTITIONER written referrals, whether from doctors or dentists, received within the REPORTING PERIOD for a first Out-Patient Appointment Consultant regardless of whether or not they resulted in an Out-Patient Attendance Consultant.~~

~~GP WRITTEN REFERRALS is the total number of GP written referrals where:~~ This item has been retired from the NHS Data Model and Dictionary.

- ~~a. the REFERRAL REQUEST TYPE of the REFERRAL REQUEST is National Code 'GP referral request'~~
- ~~and b. the WRITTEN REFERRAL REQUEST INDICATOR of the REFERRAL REQUEST is classification 'Yes'~~
- ~~and c. the REFERRAL REQUEST is for an Out-Patient Appointment Consultant whether directed to a specific CONSULTANT or not~~
- ~~and d. the ORIGINAL REFERRAL REQUEST RECEIVED DATE of the REFERRAL REQUEST is within the period of the REPORTING PERIOD START DATE and the REPORTING PERIOD END DATE.~~

~~Within the REPORTING PERIOD includes where the DATE is the same as the START DATE or END DATE~~

~~The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.~~

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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## GP WRITTEN REFERRALS (RETIRED)\_ renamed from GP WRITTEN REFERRALS

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Change to Data Element: Changed status to Retired, Name, Description

- Retired GP WRITTEN REFERRALS
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.G.GI.GP\_WRITTEN\_REFERRALS to Retired.Data\_Dictionary.Data\_Field\_Notes.G.GP\_WRITTEN\_REFERRALS
- Changed Description

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## GP WRITTEN REFERRALS BOOKED (RETIRED)\_ renamed from GP WRITTEN REFERRALS BOOKED

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Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	n10
HES Item:	
National Codes:	
Default Codes:	

### Notes:

~~GP WRITTEN REFERRALS BOOKED is the total number of GP WRITTEN REFERRALS, whether from doctors or dentists, received within the REPORTING PERIOD for a first Out-Patient Appointment Consultant where a booking system was used. This is regardless of whether or not they resulted in an Out-Patient Attendance Consultant.~~

~~Currently this count only includes GP WRITTEN REFERRALS to a named CONSULTANT and excludes any other form of REFERRAL REQUEST whether to a named CONSULTANT or not. This item has been retired from the NHS Data Model and Dictionary.~~

~~GP WRITTEN REFERRALS BOOKED is the total number of GP WRITTEN REFERRALS where:~~ The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

- ~~a. the REFERRAL REQUEST TYPE of the REFERRAL REQUEST is National Code 'GP referral request'~~
  - ~~and b. the WRITTEN REFERRAL REQUEST INDICATOR of the REFERRAL REQUEST is classification 'Yes'~~
  - ~~and c. the REFERRAL REQUEST is to a CONSULTANT for an Out-Patient Appointment Consultant~~
  - ~~and d. the ORIGINAL REFERRAL REQUEST RECEIVED DATE of the REFERRAL REQUEST is within the period of the REPORTING PERIOD START DATE and the REPORTING PERIOD END DATE.~~
- ~~Within the REPORTING PERIOD includes where the DATE is the same as the START DATE or END DATE~~
- ~~e. the APPOINTMENT BOOKING SYSTEM TYPE of the REFERRAL REQUEST is classification 'Partial booking system - non-Choose and Book system' or 'Full booking system - non-Choose and Book system' or 'Choose and Book system'~~

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.



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## GP WRITTEN REFERRALS BOOKED (RETIRED)\_ renamed from GP WRITTEN REFERRALS BOOKED

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Change to Data Element: Changed status to Retired, Name, Description

- Retired GP WRITTEN REFERRALS BOOKED
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.G.GI.GP\_WRITTEN\_REFERRALS\_BOOKED to Retired.Data\_Dictionary.Data\_Field\_Notes.G.GP\_WRITTEN\_REFERRALS\_BOOKED
- Changed Description

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## GP WRITTEN REFERRALS MADE (RETIRED)\_ renamed from GP WRITTEN REFERRALS MADE

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Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	n10
HES Item:	
National Codes:	
Default Codes:	

### Notes:

GP WRITTEN REFERRALS MADE is the total number of APPOINTMENTS resulting from GENERAL PRACTITIONER written referrals, whether from doctors or dentists, where PATIENTS have been added to an Out-Patient Waiting List within the REPORTING PERIOD for a first Out-Patient Appointment Consultant.

Currently this count only includes GP written referrals to a named CONSULTANT and excludes any other form of REFERRAL REQUEST whether to a named CONSULTANT or not. This item has been retired from the NHS Data Model and Dictionary.

The DECISION TO OFFER AN APPOINTMENT DATE of a SERVICE REQUEST indicates in which REPORTING PERIOD the PATIENT was added to an Out-Patient Waiting List as a result of the REFERRAL REQUEST received. Note there may be a period of time between when the referral was received and when the decision to offer an APPOINTMENT was made and recorded depending upon referral process and whether and what type of booking systems was used. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

GP WRITTEN REFERRALS MADE is the total number of APPOINTMENTS arising from GP written referrals where Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

- a. the REFERRAL REQUEST TYPE of the REFERRAL REQUEST is National Code 'GP referral request'
- and
- b. the WRITTEN REFERRAL REQUEST INDICATOR of the REFERRAL REQUEST is classification 'Yes'
- and
- c. the REFERRAL REQUEST is to a CONSULTANT for an Out-Patient Appointment Consultant
- and
- d. the DECISION TO OFFER AN APPOINTMENT DATE of the SERVICE REQUEST is within the period of the REPORTING PERIOD START DATE and the REPORTING PERIOD END DATE.  
Within the REPORTING PERIOD includes where the DATE is the same as the START DATE or END DATE
- and
- e. the APPOINTMENT FIRST ATTENDANCE of the APPOINTMENT is National Code 'First appointment'  
or  
where there is one or more APPOINTMENT recorded for a PATIENT but none has as yet taken place, the notional 'first appointment' included in the count will be the APPOINTMENT with the earliest APPOINTMENT DATE. This excludes any APPOINTMENTS which have been cancelled as indicated by a recorded APPOINTMENT CANCELLED DATE.

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## GP WRITTEN REFERRALS MADE (RETIRED)\_ renamed from GP WRITTEN REFERRALS MADE

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Change to Data Element: Changed status to Retired, Name, Description

- Retired GP WRITTEN REFERRALS MADE
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.G.GI.GP\_WRITTEN\_REFERRALS\_MADE to Retired.Data\_Dictionary.Data\_Field\_Notes.G.GP\_WRITTEN\_REFERRALS\_MADE
- Changed Description

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## GP WRITTEN REFERRALS SEEN (RETIRED)\_ renamed from GP WRITTEN REFERRALS SEEN

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Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	n10
HES Item:	
National Codes:	
Default Codes:	

### Notes:

GP WRITTEN REFERRALS SEEN is the total number of FIRST ATTENDANCE APPOINTMENTS resulting from GP WRITTEN REFERRALS, whether from doctors or dentists, where the Out-Patient Attendance Consultant took place within the REPORTING PERIOD. This includes private PATIENTS attendances.

Currently this count only includes GP WRITTEN REFERRALS to a named CONSULTANT and excludes any other form of REFERRAL REQUEST whether to a named CONSULTANT or not. This item has been retired from the NHS Data Model and Dictionary.

When an Out-Patient Appointment Consultant APPOINTMENT takes place an Out-Patient Attendance Consultant CARE CONTACT records the attendance with FIRST ATTENDANCE recording whether it is a FIRST ATTENDANCE or a follow-up attendance and ACTIVITY DATE recording the Attendance Date. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

The ADMINISTRATIVE CATEGORY records whether a PATIENT is a private or NHS PATIENT and should be the ADMINISTRATIVE CATEGORY which is current at the DATE of the attendance ACTIVITY DATE. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

GP WRITTEN REFERRALS SEEN is the total number of GP WRITTEN REFERRALS FIRST ATTENDANCE APPOINTMENTS where:

- a. the REFERRAL REQUEST TYPE of the REFERRAL REQUEST is National Code 'GP referral request'
- and
- b. the WRITTEN REFERRAL REQUEST INDICATOR of the REFERRAL REQUEST is classification 'Yes'
- and
- c. the REFERRAL REQUEST is to a CONSULTANT for an Out-Patient Appointment Consultant
- and
- d. the FIRST ATTENDANCE of the Out-Patient Appointment Consultant CARE CONTACT is National Code 'First attendance face-to-face' or 'First telephone or telemedicine consultation'
- and
- e. the ACTIVITY DATE of the Out-Patient Appointment Consultant CARE CONTACT is within the period of the REPORTING PERIOD START DATE and the REPORTING PERIOD END DATE  
Within the REPORTING PERIOD includes where the DATE is the same as the START DATE or END DATE

#### GP WRITTEN REFERRALS SEEN (RETIRED)\_ renamed from GP WRITTEN REFERRALS SEEN

Change to Data Element: Changed status to Retired, Name, Description

- Retired GP WRITTEN REFERRALS SEEN
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.G.GI.GP\_WRITTEN\_REFERRALS\_SEEN to Retired.Data\_Dictionary.Data\_Field\_Notes.G.GP\_WRITTEN\_REFERRALS\_SEEN
- Changed Description

#### NUMBER OF OUT-PATIENT CONVERTED UNIQUE BOOKING REFERENCE NUMBERS (RETIRED)\_ renamed from NUMBER OF OUT-PATIENT CONVERTED UNIQUE BOOKING REFERENCE NUMBERS

Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	n10
HES Item:	
National Codes:	
Default Codes:	

#### Notes:

NUMBER OF OUT-PATIENT CONVERTED UNIQUE BOOKING REFERENCE NUMBERS is the total number of APPOINTMENTS where the APPOINTMENT ACCEPTED DATE is within the REPORTING PERIOD for an Out-Patient Appointment Consultant and where the Choose and Book system was used:

Currently this count only includes requests to a named CONSULTANT for an Out-Patient Appointment Consultant and excludes any other form of request. This item has been retired from the NHS Data Model and Dictionary.

The APPOINTMENT ACCEPTED DATE of an APPOINTMENT indicates in which REPORTING PERIOD the APPOINTMENT DATE OFFERED of an APPOINTMENT OFFER was accepted by, or on behalf of the PATIENT this is regardless of the APPOINTMENT DATE which may be within a different period. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

When an APPOINTMENT is created and recorded, the unique booking reference used by the Choose and Book system is recorded by UNIQUE BOOKING REFERENCE NUMBER (CONVERTED). Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

It is the total of number of APPOINTMENTS where:

- a. the REFERRAL REQUEST TYPE of the REFERRAL REQUEST is National Code 'GP referral request'
- and
- b. the REFERRAL REQUEST is to a CONSULTANT for an Out-Patient Appointment Consultant
- and
- c. the APPOINTMENT ACCEPTED DATE is within the period of the REPORTING PERIOD START DATE and the REPORTING PERIOD END DATE.  
Within the REPORTING PERIOD includes where the DATE is the same as the Start Date or End Date
- and
- d. the APPOINTMENT BOOKING SYSTEM TYPE of the APPOINTMENT is classification 'Choose and Book system'

#### NUMBER OF OUT-PATIENT CONVERTED UNIQUE BOOKING REFERENCE NUMBERS (RETIRED)\_ renamed from NUMBER OF OUT-PATIENT CONVERTED UNIQUE BOOKING REFERENCE NUMBERS

Change to Data Element: Changed status to Retired, Name, Description

- Retired NUMBER OF OUT-PATIENT CONVERTED UNIQUE BOOKING REFERENCE NUMBERS
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.N.Nu.NUMBER\_OF\_OUT-PATIENT\_CONVERTED\_UNIQUE\_BOOKING\_REFERENCE\_NUMBERS to Retired.Data\_Dictionary.Data\_Field\_Notes.N.NUMBER\_OF\_OUT-PATIENT\_CONVERTED\_UNIQUE\_BOOKING\_REFERENCE\_NUMBERS
- Changed Description

#### OTHER REFERRALS (RETIRED)\_ renamed from OTHER REFERRALS

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	

National Codes:  
Default Codes:

#### Notes:

The total number of non-GP written [REFERRAL REQUESTS](#) received within the [REPORTING PERIOD](#) for a first [Out-Patient Appointment Consultant](#) regardless of whether or not they resulted in an [Out-Patient Attendance Consultant](#). This item has been retired from the NHS Data Model and Dictionary.

It is the total number of [REFERRAL REQUESTS](#) where: The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

- a. the [REFERRAL REQUEST](#) is to a [CONSULTANT](#) for a first [Out-Patient Appointment Consultant](#)
- and
- b. the [ORIGINAL REFERRAL REQUEST RECEIVED DATE](#) of the [REFERRAL REQUEST](#) is within the period of the [REPORTING PERIOD START DATE](#) and the [REPORTING PERIOD END DATE](#).
- Within the reporting period includes where the date is the same as the start date or end date

However, this total number should exclude the following types of [REFERRAL REQUESTS](#). Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

- a. GP written referrals: these are where the [REFERRAL REQUEST TYPE](#) of the [REFERRAL REQUEST](#) is National Code 01 'GP referral request' and the [WRITTEN REFERRAL REQUEST INDICATOR](#) of the [REFERRAL REQUEST](#) is classification 'Yes'
- b. Self-referrals: these are where the [REFERRAL REQUEST TYPE](#) of the [REFERRAL REQUEST](#) is National Code 04 'Patient self-referral request'
- c. Initiated by the [CONSULTANT](#) responsible for the [Consultant Out-Patient Episode](#) referrals: these are where the [SOURCE OF REFERRAL FOR OUT-PATIENTS](#) of the [REFERRAL REQUEST](#) is National Code 01 'following an emergency admission' or 02 'following a domiciliary visit' or 10 'following an Accident And Emergency Attendance' or 11 'other'
- d. Referrals initiated by attendance at drop-in clinic without prior appointment: these are where the [OUT-PATIENT CLINIC REFERRING INDICATOR](#) of the [REFERRAL REQUEST](#) is classification 'Attended referring Out-Patient Clinic without prior appointment'

#### OTHER REFERRALS (RETIRED)\_ renamed from OTHER REFERRALS

Change to Data Element: Changed status to Retired, Name, Description

- Retired OTHER REFERRALS
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.O.Ori.OTHER\_REFERRALS to Retired.Data\_Dictionary.Data\_Field\_Notes.O.OTHER\_REFERRALS
- Changed Description

#### OUT-PATIENT EFFECTIVE WAITS (RETIRED)\_ renamed from OUT-PATIENT EFFECTIVE WAITS

Change to Data Element: Changed status to Retired, Name, Description

Format/length: n10  
HES item:  
National Codes:  
Default Codes:

#### Notes:

The total number of [GP WRITTEN REFERRALS](#) with a particular effective waiting time band, whether from doctors or dentists, measured from receipt of the referral and the first [Out-Patient Attendance Consultant](#). This item has been retired from the NHS Data Model and Dictionary.

The effective waiting time band should be calculated from the [FIRST ATTENDANCE EFFECTIVE WAIT START DATE](#) which takes into account any waiting time resets instigated by the [PATIENT](#). The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

It is the total number of [GP WRITTEN REFERRALS](#) where: Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

- a. the [REFERRAL REQUEST TYPE](#) of the [REFERRAL REQUEST](#) is National Code 01 'GP referral request'
- and
- b. the [WRITTEN REFERRAL REQUEST INDICATOR](#) of the [REFERRAL REQUEST](#) is classification 'Yes'
- and
- c. the [REFERRAL REQUEST](#) is to a [CONSULTANT](#) for an [Out-Patient Appointment Consultant](#)
- and
- d. the [FIRST ATTENDANCE](#) of the [Out-Patient Attendance Consultant](#) [CARE CONTACT](#) is National Code 1 'First attendance face to face' or 3 'First telephone or telemedicine consultation' and the [ACTIVITY DATE](#) of the [Out-Patient Attendance Consultant](#) [CARE CONTACT](#) is within the period of the [REPORTING PERIOD START DATE](#) and the [REPORTING PERIOD END DATE](#)
- Within the [REPORTING PERIOD](#) includes where the [DATE](#) is the same as the [START DATE](#) or [END DATE](#).
- or
- e. no first [Out-Patient Attendance Consultant](#) [CARE CONTACT](#) has been recorded and the calculated waiting time between the [FIRST ATTENDANCE EFFECTIVE WAIT START DATE](#) and the [REPORTING PERIOD END DATE](#).

Out-Patient Effective Waiting Time Calculation provides full details on calculating the waiting time band.

#### OUT-PATIENT EFFECTIVE WAITS (RETIRED)\_ renamed from OUT-PATIENT EFFECTIVE WAITS

Change to Data Element: Changed status to Retired, Name, Description

- Retired OUT-PATIENT EFFECTIVE WAITS
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.O.Ou.OUT-PATIENT\_EFFECTIVE\_WAITS to Retired.Data\_Dictionary.Data\_Field\_Notes.O.OUT-PATIENT\_EFFECTIVE\_WAITS
- Changed Description

## OUT-PATIENT FIRST APPOINTMENTS DID NOT ATTEND (RETIRED)\_ renamed from OUT-PATIENT FIRST APPOINTMENTS DID NOT ATTEND

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

### Notes:

The total number of accepted [APPOINTMENTS](#) which should have resulted in a first [Out-Patient Attendance Consultant](#) within the [REPORTING PERIOD](#) which did not take place due to the [PATIENT](#) not attending the [APPOINTMENT](#). This includes private [PATIENT](#) non-attendances. This item has been retired from the NHS Data Model and Dictionary.

Until a [FIRST ATTENDANCE](#) actually takes place, any [APPOINTMENT](#) which did not take place due to the [PATIENT](#) not attending and which has an earlier [APPOINTMENT DATE](#) to that of the actual [FIRST ATTENDANCE APPOINTMENT](#) should be classified as should have resulted in a first [Out-Patient Attendance Consultant](#). The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

It is the total number of [APPOINTMENTS](#) where: Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

- a. the [ATTENDED OR DID NOT ATTEND](#) of the [Out-Patient Appointment Consultant APPOINTMENT](#) is National Code 3 'Did not attend - no advance warning given' or 7 'PATIENT arrived late and could not be seen'
- and
- b. the [APPOINTMENT DATE](#) is within the period of the [REPORTING PERIOD START DATE](#) and the [REPORTING PERIOD END DATE](#). Within the [REPORTING PERIOD](#) includes where the [DATE](#) is the same as the [START DATE](#) or [END DATE](#)
- and
- c. no first [Out-Patient Attendance Consultant CARE CONTACT](#) has yet been recorded for the [PATIENT](#) or  
a [FIRST ATTENDANCE Out-Patient Attendance Consultant CARE CONTACT](#) has been recorded for the [PATIENT](#) but the [ACTIVITY DATE](#) is after (or on the same day) as the [APPOINTMENT DATE](#) of the non-attended [APPOINTMENT](#)

## OUT-PATIENT FIRST APPOINTMENTS DID NOT ATTEND (RETIRED)\_ renamed from OUT-PATIENT FIRST APPOINTMENTS DID NOT ATTEND

Change to Data Element: Changed status to Retired, Name, Description

- Retired OUT-PATIENT FIRST APPOINTMENTS DID NOT ATTEND
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.O.Ou.OUT-PATIENT\_FIRST\_APPOINTMENTS\_DID\_NOT\_ATTEND to Retired.Data\_Dictionary.Data\_Field\_Notes.O.OUT-PATIENT\_FIRST\_APPOINTMENTS\_DID\_NOT\_ATTEND
- Changed Description

## OUT-PATIENT FIRST APPOINTMENTS FIRST ATTENDANCES SEEN (RETIRED)\_ renamed from OUT-PATIENT FIRST APPOINTMENTS FIRST ATTENDANCES SEEN

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

### Notes:

The total number of [FIRST ATTENDANCE APPOINTMENTS](#) where the [Out-Patient Attendance Consultant](#) took place within the [REPORTING PERIOD](#). This includes private [PATIENT](#) attendances. This item has been retired from the NHS Data Model and Dictionary.

It is the total number of [FIRST ATTENDANCE APPOINTMENTS](#) where: The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

- a. the [FIRST ATTENDANCE](#) of the [Out-Patient Attendance Consultant CARE CONTACT](#) is National Code 1 'First attendance face to face' or 3 'First telephone or telemedicine consultation'
- and
- b. the [ACTIVITY DATE](#) of the [Out-Patient Attendance Consultant CARE CONTACT](#) is within the period of the [REPORTING PERIOD START DATE](#) and the [REPORTING PERIOD END DATE](#). Within the [REPORTING PERIOD](#) includes where the [DATE](#) is the same as the [START DATE](#) or [END DATE](#)

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## OUT-PATIENT FIRST APPOINTMENTS FIRST ATTENDANCES SEEN (RETIRED)\_ renamed from OUT-PATIENT FIRST APPOINTMENTS FIRST ATTENDANCES SEEN

Change to Data Element: Changed status to Retired, Name, Description

- Retired OUT-PATIENT FIRST APPOINTMENTS FIRST ATTENDANCES SEEN
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.O.Ou.OUT-PATIENT\_FIRST\_APPOINTMENTS\_FIRST\_ATTENDANCES\_SEEN to Retired.Data\_Dictionary.Data\_Field\_Notes.O.OUT-PATIENT\_FIRST\_APPOINTMENTS\_FIRST\_ATTENDANCES\_SEEN
- Changed Description

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## OUT-PATIENT FOLLOW-UP APPOINTMENTS ATTENDANCES SEEN (RETIRED) renamed from OUT-PATIENT FOLLOW-UP APPOINTMENTS ATTENDANCES SEEN

---

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

### Notes:

The total number of follow-up attendance APPOINTMENTS, where the Out-Patient Attendance Consultant took place within the REPORTING PERIOD. This includes private PATIENT attendances. This item has been retired from the NHS Data Model and Dictionary.

When an Out-Patient Appointment Consultant APPOINTMENT takes place, an Out-Patient Attendance Consultant CARE CONTACT records the attendance with FIRST ATTENDANCE recording whether it is a FIRST ATTENDANCE or a follow-up attendance and ACTIVITY DATE recording the ATTENDANCE DATE. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

The ADMINISTRATIVE CATEGORY records whether a PATIENT is a private or NHS PATIENT and should be the ADMINISTRATIVE CATEGORY which is current at the DATE of the attendance ACTIVITY DATE. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

It is the total number of follow-up attendance APPOINTMENTS where:

- a. the FIRST ATTENDANCE of the Out-Patient Attendance Consultant CARE CONTACT is National Code 2 'Follow-up attendance face to face' or 4 'Follow-up telephone or telemedicine consultation'
- and
- b. the ACTIVITY DATE of the Out-Patient Attendance Consultant CARE CONTACT is within the period of the REPORTING PERIOD START DATE and the REPORTING PERIOD END DATE  
Within the REPORTING PERIOD includes where the DATE is the same as the START DATE or END DATE

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## OUT-PATIENT FOLLOW-UP APPOINTMENTS ATTENDANCES SEEN (RETIRED) renamed from OUT-PATIENT FOLLOW-UP APPOINTMENTS ATTENDANCES SEEN

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Change to Data Element: Changed status to Retired, Name, Description

- Retired OUT-PATIENT FOLLOW-UP APPOINTMENTS ATTENDANCES SEEN
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.O.Ou.OUT-PATIENT\_FOLLOW-UP\_APPOINTMENTS\_ATTENDANCES\_SEEN to Retired.Data\_Dictionary.Data\_Field\_Notes.O.OUT-PATIENT\_FOLLOW-UP\_APPOINTMENTS\_ATTENDANCES\_SEEN
- Changed Description

---

## OUT-PATIENT FOLLOW-UP APPOINTMENTS DID NOT ATTEND (RETIRED) renamed from OUT-PATIENT FOLLOW-UP APPOINTMENTS DID NOT ATTEND

---

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

### Notes:

The total number of accepted APPOINTMENTS which should have resulted in a follow-up Out-Patient Attendance Consultant within the REPORTING PERIOD which did not take place due to the PATIENT not attending the APPOINTMENT. This includes private PATIENT non-attendances. This item has been retired from the NHS Data Model and Dictionary.

When an Out-Patient Attendance Consultant actually takes place, any APPOINTMENT which did not take place due to the PATIENT not attending and which has a later APPOINTMENT DATE to that of the actual FIRST ATTENDANCE APPOINTMENT should be classified as should have resulted in a follow-up Out-Patient Attendance Consultant. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

It is the total number of APPOINTMENTS where: Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

- a. the ATTENDED OR DID NOT ATTEND of the Out-Patient Appointment Consultant APPOINTMENT is National Code 3 'Did not attend - no advance warning given' or 7 'PATIENT arrived late and could not be seen'
- and
- b. the APPOINTMENT DATE is within the period of the REPORTING PERIOD START DATE and the REPORTING PERIOD END DATE  
Within the REPORTING PERIOD includes where the DATE is the same as the START DATE or END DATE
- and
- c. a first Out-Patient Attendance Consultant CARE CONTACT has been recorded for the PATIENT  
and  
the ACTIVITY DATE is before (or on the same day) as the APPOINTMENT DATE of the non-attended APPOINTMENT

---

## OUT-PATIENT FOLLOW-UP APPOINTMENTS DID NOT ATTEND (RETIRED) renamed from OUT-PATIENT FOLLOW-UP APPOINTMENTS DID NOT ATTEND

---

Change to Data Element: Changed status to Retired, Name, Description

- Retired OUT-PATIENT FOLLOW-UP APPOINTMENTS DID NOT ATTEND
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.O.Ou.OUT-PATIENT\_FOLLOW-UP\_APPOINTMENTS\_DID\_NOT\_ATTEND to Retired.Data\_Dictionary.Data\_Field\_Notes.O.OUT-PATIENT\_FOLLOW-UP\_APPOINTMENTS\_DID\_NOT\_ATTEND

- Changed Description

## OUT-PATIENTS WAITING (RETIRED)\_ renamed from OUT-PATIENTS WAITING

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

### Notes:

The total number of [GP WRITTEN REFERRALS](#), whether from doctors or dentists, where the first [Out-Patient Attendance Consultant](#) has not yet taken place. This item has been retired from the NHS Data Model and Dictionary.

When an [Out-Patient Appointment Consultant](#) [APPOINTMENT](#) takes place, an [Out-Patient Attendance Consultant](#) [CARE CONTACT](#) records the attendance with [FIRST ATTENDANCE](#) recording whether it is a [FIRST ATTENDANCE](#) or a follow-up attendance and [ACTIVITY DATE](#) recording the [ATTENDANCE DATE](#). The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

The effective waiting period should be calculated from the [FIRST ATTENDANCE EFFECTIVE WAIT START DATE](#) which takes into account any waiting time resets instigated by the [PATIENT](#). Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

It is the total number of [GP WRITTEN REFERRALS](#) where:

- a. the [REFERRAL REQUEST TYPE](#) of the [REFERRAL REQUEST](#) is National Code 01 'GP referral request'
- and
- b. the [WRITTEN REFERRAL REQUEST INDICATOR](#) of the [REFERRAL REQUEST](#) is classification 'Yes'
- and
- c. the [REFERRAL REQUEST](#) is to a [CONSULTANT](#) for an [Out-Patient Appointment Consultant](#)
- and
- d. no first [Out-Patient Attendance Consultant](#) [CARE CONTACT](#) has been recorded
- and
- e. the calculated waiting time between the [FIRST ATTENDANCE EFFECTIVE WAIT START DATE](#) and the [REPORTING PERIOD END DATE](#) [Out-Patient Effective Waiting Time Calculation](#) provides full details on calculating the waiting time band

## OUT-PATIENTS WAITING (RETIRED)\_ renamed from OUT-PATIENTS WAITING

Change to Data Element: Changed status to Retired, Name, Description

- Retired OUT-PATIENTS WAITING
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.O.Ou.OUT-PATIENTS\_WAITING to Retired.Data\_Dictionary.Data\_Field\_Notes.O.OUT-PATIENTS\_WAITING
- Changed Description

## OUT-PATIENT WAITING TIME BAND (RETIRED)\_ renamed from OUT-PATIENT WAITING TIME BAND

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	character
HES item:	
National Codes:	
Default Codes:	

### Notes:

The time band for [OUT-PATIENTS WAITING](#) or [OUT-PATIENT EFFECTIVE WAITS](#) for the period between receipt of the referral and the end of the [REPORTING PERIOD](#). This item has been retired from the NHS Data Model and Dictionary.

The timebands are as follows: The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

0	less than 1 week
01-02	1 to less than 2 weeks
02-03	at least 2 weeks to less than 3 weeks
03-04	at least 3 weeks to less than 4 weeks
04-05	at least 4 weeks to less than 5 weeks
05-06	at least 5 weeks to less than 6 weeks
06-07	at least 6 weeks to less than 7 weeks
07-08	at least 7 weeks to less than 8 weeks
08-09	at least 8 weeks to less than 9 weeks
09-10	at least 9 weeks to less than 10 weeks
10-11	at least 10 weeks to less than 11 weeks
11-12	at least 11 weeks to less than 12 weeks
12-13	at least 12 weeks to less than 13 weeks
13-14	at least 13 weeks to less than 14 weeks
14-15	at least 14 weeks to less than 15 weeks
15-16	at least 15 weeks to less than 16 weeks
16-17	at least 16 weeks to less than 17 weeks
17+	more than 17 weeks

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## OUT-PATIENT WAITING TIME BAND (RETIRED)\_ renamed from OUT-PATIENT WAITING TIME BAND

Change to Data Element: Changed status to Retired, Name, Description

- Retired OUT-PATIENT WAITING TIME BAND
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.O.Ou.OUT-PATIENT\_WAITING\_TIME\_BAND to Retired.Data\_Dictionary.Data\_Field\_Notes.O.OUT-PATIENT\_WAITING\_TIME\_BAND
- Changed Description

#### PATIENTS ADMITTED (DAY CASE) (RETIRED)\_ renamed from PATIENTS ADMITTED (DAY CASE)

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

##### Notes:

The total [PATIENTS ADMITTED NUMBER](#) where the [PATIENT CLASSIFICATION](#) of the [Hospital Provider Spell](#) [ACTIVITY GROUP](#) is National Code 2 - Day case admission. This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

#### PATIENTS ADMITTED (DAY CASE) (RETIRED)\_ renamed from PATIENTS ADMITTED (DAY CASE)

Change to Data Element: Changed status to Retired, Name, Description

- Retired PATIENTS ADMITTED (DAY CASE)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.P.Pat.PATIENTS\_ADMITTED\_(DAY\_CASE) to Retired.Data\_Dictionary.Data\_Field\_Notes.P.PATIENTS\_ADMITTED\_(DAY\_CASE)
- Changed Description

#### PATIENTS ADMITTED (ORDINARY) (RETIRED)\_ renamed from PATIENTS ADMITTED (ORDINARY)

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

##### Notes:

The total [PATIENTS ADMITTED NUMBER](#) where the [PATIENT CLASSIFICATION](#) of the [Hospital Provider Spell](#) [ACTIVITY GROUP](#) is National Code 4 - Ordinary admission. This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

#### PATIENTS ADMITTED (ORDINARY) (RETIRED)\_ renamed from PATIENTS ADMITTED (ORDINARY)

Change to Data Element: Changed status to Retired, Name, Description

- Retired PATIENTS ADMITTED (ORDINARY)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.P.Pat.PATIENTS\_ADMITTED\_(ORDINARY) to Retired.Data\_Dictionary.Data\_Field\_Notes.P.PATIENTS\_ADMITTED\_(ORDINARY)
- Changed Description

#### PATIENTS ADMITTED NUMBER (RETIRED)\_ renamed from PATIENTS ADMITTED NUMBER

Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	n10
HES Item:	
National Codes:	
Default Codes:	

##### Notes:

[PATIENTS ADMITTED NUMBER](#) is the total number of [PATIENTS](#) classified as booked admissions or [WAITING LIST](#) admissions, admitted from an [ELECTIVE ADMISSION LIST](#) to a [Hospital Provider Spell](#) as day case admissions within the [REPORTING PERIOD](#). This includes [PATIENTS](#) who have been admitted and then are subsequently sent home without treatment.

It includes private [PATIENTS](#) and [Overseas Visitors](#), it excludes elective planned admissions. This item has been retired from the NHS Data Model and Dictionary.

It is the total of number of elective admissions for [PATIENTS](#) where. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

- a- the [ADMISSION OFFER OUTCOME](#) of the [OFFER OF ADMISSION](#) is National Code '~~Patient admitted – treatment commenced~~' or '~~Patient admitted – treatment deferred~~'
- and
- b- the [ADMISSION METHOD](#) of the [Hospital Provider Spell ACTIVITY GROUP](#) is National Code '~~Waiting list~~' or '~~Booked~~'
- and
- c- the [ACTIVITY DATE](#) of the [Hospital Provider Spell ACTIVITY GROUP](#) recording the [Start Date](#) of the [Hospital Provider Spell](#) is within the period of the [REPORTING PERIOD START DATE](#) and the [REPORTING PERIOD END DATE](#).
- Within the [REPORTING PERIOD](#) includes where the [DATE](#) is the same as the [START DATE](#) or [END DATE](#)
- and
- d- the [PATIENT CLASSIFICATION](#) of the [Hospital Provider Spell ACTIVITY GROUP](#) is National Code '~~Day case admission~~'

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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#### PATIENTS ADMITTED NUMBER (RETIRED)\_ renamed from PATIENTS ADMITTED NUMBER

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Change to Data Element: Changed status to Retired, Name, Description

- Retired PATIENTS ADMITTED NUMBER
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.P.Pat.PATIENTS\_ADMITTED\_NUMBER to Retired.Data\_Dictionary.Data\_Field\_Notes.P.PATIENTS\_ADMITTED\_NUMBER
- Changed Description

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#### PATIENTS FAILED TO ATTEND (DAY CASE) (RETIRED)\_ renamed from PATIENTS FAILED TO ATTEND (DAY CASE)

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Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

##### Notes:

The total [PATIENTS FAILED TO ATTEND](#) where the [PATIENT CLASSIFICATION](#) for the [ELECTIVE ADMISSION LIST ENTRY](#) is National Code 2 '~~Day case admission~~'. This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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#### PATIENTS FAILED TO ATTEND (DAY CASE) (RETIRED)\_ renamed from PATIENTS FAILED TO ATTEND (DAY CASE)

---

Change to Data Element: Changed status to Retired, Name, Description

- Retired PATIENTS FAILED TO ATTEND (DAY CASE)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.P.Pat.PATIENTS\_FAILED\_TO\_ATTEND\_(DAY\_CASE) to Retired.Data\_Dictionary.Data\_Field\_Notes.P.PATIENTS\_FAILED\_TO\_ATTEND\_(DAY\_CASE)
- Changed Description

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#### PATIENTS FAILED TO ATTEND (ORDINARY) (RETIRED)\_ renamed from PATIENTS FAILED TO ATTEND (ORDINARY)

---

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

##### Notes:

The total [PATIENTS FAILED TO ATTEND](#) where the [PATIENT CLASSIFICATION](#) for the [ELECTIVE ADMISSION LIST ENTRY](#) is National Code 1 '~~Ordinary admission~~'. This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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#### PATIENTS FAILED TO ATTEND (ORDINARY) (RETIRED)\_ renamed from PATIENTS FAILED TO ATTEND (ORDINARY)

---

Change to Data Element: Changed status to Retired, Name, Description

- Retired PATIENTS FAILED TO ATTEND (ORDINARY)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.P.Pat.PATIENTS\_FAILED\_TO\_ATTEND\_(ORDINARY) to Retired.Data\_Dictionary.Data\_Field\_Notes.P.PATIENTS\_FAILED\_TO\_ATTEND\_(ORDINARY)
- Changed Description

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#### PATIENTS FAILED TO ATTEND (RETIRED)\_ renamed from PATIENTS FAILED TO ATTEND

---

Change to Data Element: Changed status to Retired, Name, Description



Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

**Notes:**

The total number of PATIENTS classified as booked admissions or WAITING LIST admissions, who giving no advanced warning failed to attend for admission from an ELECTIVE ADMISSION LIST to a Hospital Provider Spell within the REPORTING PERIOD. This item has been retired from the NHS Data Model and Dictionary.

It includes private PATIENTS and PATIENTS from overseas, it excludes elective planned admissions, Self-Deferred Admission by the PATIENT and Suspended Patients. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

It is the total of number of failed to attend for Elective Admission for PATIENTS where: Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

- a. the ADMISSION OFFER OUTCOME of the OFFER OF ADMISSION is National Code 4 'Patient failed to arrive'
- and
- b. the OFFERED FOR ADMISSION DATE of the OFFER OF ADMISSION for the Elective Admission List entry is within the period of the REPORTING PERIOD START DATE and the REPORTING PERIOD END DATE  
Within the REPORTING PERIOD includes where the DATE is the same as the START DATE or END DATE
- and
- c. no ELECTIVE ADMISSION SUSPENSION DETAIL has been recorded  
or  
if recorded, the LIST SUSPENSION END DATE is before the OFFERED FOR ADMISSION DATE i.e. no period of suspension is still on-going at the DATE failed to attend. Where no LIST SUSPENSION END DATE has been recorded then the period of suspension is still active and should be excluded from the count
- and
- d. the ELECTIVE ADMISSION TYPE is National Code 11 'Waiting list admission' or 12 'Booked admission'

## PATIENTS FAILED TO ATTEND (RETIRED)\_ renamed from PATIENTS FAILED TO ATTEND

Change to Data Element: Changed status to Retired, Name, Description

- Retired PATIENTS FAILED TO ATTEND
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.P.Pat.PATIENTS\_FAILED\_TO\_ATTEND to Retired.Data\_Dictionary.Data\_Field\_Notes.P.PATIENTS\_FAILED\_TO\_ATTEND
- Changed Description

## PATIENTS SUSPENDED (DAY CASE) (RETIRED)\_ renamed from PATIENTS SUSPENDED (DAY CASE)

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n10
HES item:	
National Codes:	
Default Codes:	

**Notes:**

This is the same as PATIENTS SUSPENDED (ORDINARY) except that the specified PATIENT CLASSIFICATION is 'day case'. This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## PATIENTS SUSPENDED (DAY CASE) (RETIRED)\_ renamed from PATIENTS SUSPENDED (DAY CASE)

Change to Data Element: Changed status to Retired, Name, Description

- Retired PATIENTS SUSPENDED (DAY CASE)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.P.Pat.PATIENTS\_SUSPENDED\_(DAY\_CASE) to Retired.Data\_Dictionary.Data\_Field\_Notes.P.PATIENTS\_SUSPENDED\_(DAY\_CASE)
- Changed Description

## PATIENTS SUSPENDED (ORDINARY) (RETIRED)\_ renamed from PATIENTS SUSPENDED (ORDINARY)

Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	n10
HES Item:	
National Codes:	
Default Codes:	

**Notes:**

PATIENTS SUSPENDED (ORDINARY) is the total number of PATIENTS classified as booked admissions or WAITING LIST admissions, who are still waiting to be admitted from an ELECTIVE ADMISSION LIST to a Hospital Provider Spell for the specified PATIENT CLASSIFICATION of 'Ordinary Admission' who at the REPORTING PERIOD END DATE are Suspended Patients.

It excludes private PATIENTS, PATIENTS who are Overseas Visitors and elective planned admissions. This item has been retired from the NHS Data Model and Dictionary.

It is the total of number of Suspended Patients on the ELECTIVE ADMISSION LIST where: The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

- a. no ELECTIVE ADMISSION LIST REMOVAL REASON and ELECTIVE ADMISSION LIST REMOVAL DATE is recorded i.e. the PATIENT is still waiting for admission on the WAITING LIST  
or  
if recorded, ELECTIVE ADMISSION LIST REMOVAL DATE is after the REPORTING PERIOD END DATE i.e. the PATIENT was waiting for admission on the WAITING LIST as at the end of the REPORTING PERIOD and should therefore be included in the count
- and
- b. an ELECTIVE ADMISSION SUSPENSION DETAIL is recorded where the LIST SUSPENSION START DATE is before or on the REPORTING PERIOD END DATE  
and  
the LIST SUSPENSION END DATE is on or after the REPORTING PERIOD END DATE  
or  
no LIST SUSPENSION END DATE is recorded i.e. it is still active and on-going
- and
- c. the ADMINISTRATIVE CATEGORY CODE of the ADMINISTRATIVE CATEGORY for the ELECTIVE ADMISSION LIST ENTRY is National Code 'NHS PATIENT', including Overseas Visitors charged under the National Health Service (Overseas Visitors Hospital Charging Regulations)  
and  
no OVERSEAS VISITOR STATUS is recorded for the ELECTIVE ADMISSION LIST ENTRY
- and
- d. the ELECTIVE ADMISSION TYPE is National Code 11 'Waiting list admission' or 12 'Booked admission'
- and
- e. PATIENT CLASSIFICATION is 'Ordinary Admission'

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## PATIENTS SUSPENDED (ORDINARY) (RETIRED)\_ renamed from PATIENTS SUSPENDED (ORDINARY)

Change to Data Element: Changed status to Retired, Name, Description

- Retired PATIENTS SUSPENDED (ORDINARY)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.P.Pat.PATIENTS\_SUSPENDED\_(ORDINARY) to Retired.Data\_Dictionary.Data\_Field\_Notes.P.PATIENTS\_SUSPENDED\_(ORDINARY)
- Changed Description

## PATIENTS WAITING FOR ADMISSION (RETIRED)\_ renamed from PATIENTS WAITING FOR ADMISSION

Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	m10
HES Item:	
National Codes:	
Default Codes:	

### Notes:

PATIENTS WAITING FOR ADMISSION is the number of PATIENTS classified as booked admissions or WAITING LIST admissions, who are waiting to be admitted from an ELECTIVE ADMISSION LIST to a Hospital Provider Spell for the specified WAITING FOR ADMISSION INTENDED MANAGEMENT on the REPORTING PERIOD END DATE.

This includes PATIENTS with an OFFER OF ADMISSION MADE DATE recorded before or on the REPORTING PERIOD END DATE. This item has been retired from the NHS Data Model and Dictionary.

PATIENTS WAITING FOR ADMISSION will be further categorised by MAIN SPECIALTY CODE of the ELECTIVE ADMISSION LIST or ADMISSION INTENDED PROCEDURE. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

This includes Self-Deferred Admission PATIENTS where a further OFFERED FOR ADMISSION DATE has been made on or before the end of the REPORTING PERIOD. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

It excludes Self-Deferred Admission PATIENTS where no further OFFERED FOR ADMISSION DATE has been made as at the end of the REPORTING PERIOD, private PATIENTS, PATIENTS who are Overseas Visitors, elective planned admissions and Suspended Patients.

It is the total of number of PATIENTS waiting Elective Admission where:

- a. no ELECTIVE ADMISSION LIST REMOVAL REASON and ELECTIVE ADMISSION LIST REMOVAL DATE is recorded i.e. the PATIENT is still waiting for admission on the WAITING LIST  
or  
if recorded, ELECTIVE ADMISSION LIST REMOVAL DATE is after the REPORTING PERIOD END DATE i.e. the PATIENTS was waiting for admission on the WAITING LIST as at the end of the REPORTING PERIOD and should therefore be included in the count
- and
- b. an OFFERED FOR ADMISSION DATE of an OFFER OF ADMISSION is recorded where the OFFER OF ADMISSION MADE DATE is before or on the REPORTING PERIOD END DATE  
Where more than one OFFER OF ADMISSION is recorded (due to Self-Deferred Admission), at least one should have an OFFER OF ADMISSION MADE DATE before or on the REPORTING PERIOD END DATE and the latest OFFER OF ADMISSION MADE DATE is before or on the REPORTING PERIOD END DATE i.e. exclude from the count if the latest offer was made after the end of the REPORTING PERIOD
- and
- c. the ADMINISTRATIVE CATEGORY CODE of the ADMINISTRATIVE CATEGORY for the ELECTIVE ADMISSION LIST ENTRY is National Code 'NHS PATIENT', including Overseas Visitors charged under the National Health Service (Overseas Visitors Hospital Charging Regulations)  
and  
no OVERSEAS VISITOR STATUS is recorded for the ELECTIVE ADMISSION LIST ENTRY
- and

- d- no [ELECTIVE ADMISSION SUSPENSION DETAIL](#) has been recorded  
or  
if recorded, the [LIST SUSPENSION START DATE](#) is before the [REPORTING PERIOD END DATE](#) and the [LIST SUSPENSION END DATE](#) is before the [REPORTING PERIOD END DATE](#) i.e. no period of suspension is still on-going as at the end of the [REPORTING PERIOD](#).  
Where no [LIST SUSPENSION END DATE](#) has been recorded or where the [LIST SUSPENSION END DATE](#) is on or after the [REPORTING PERIOD END DATE](#) then the period of suspension is still active and the [PATIENT](#) should be excluded from the count
- and
- e- the [ELECTIVE ADMISSION TYPE](#) is National Code 11 'Waiting list admission' or 12 'Booked admission'

## PATIENTS WAITING FOR ADMISSION (RETIRED)\_ renamed from PATIENTS WAITING FOR ADMISSION

Change to Data Element: Changed status to Retired, Name, Description

- Retired PATIENTS WAITING FOR ADMISSION
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.P.Pat.PATIENTS\_WAITING\_FOR\_ADMISSION to Retired.Data\_Dictionary.Data\_Field\_Notes.P.PATIENTS\_WAITING\_FOR\_ADMISSION
- Changed Description

## PATIENTS WAITING FOR ADMISSION TIME BAND (RETIRED)\_ renamed from PATIENTS WAITING FOR ADMISSION TIME BAND

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	5 character
HES item:	
National Codes:	
Default Codes:	

### Notes:

The time band for [PATIENTS WAITING FOR ADMISSION](#) This item has been retired from the NHS Data Model and Dictionary.

These are as follows: The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

0	less than 1 week
01-02	1 to less than 2 weeks
02-03	at least 2 weeks to less than 3 weeks
03-04	at least 3 weeks to less than 4 weeks
04-05	at least 4 weeks to less than 5 weeks
05-06	at least 5 weeks to less than 6 weeks
06-07	at least 6 weeks to less than 7 weeks
07-08	at least 7 weeks to less than 8 weeks
08-09	at least 8 weeks to less than 9 weeks
09-10	at least 9 weeks to less than 10 weeks
10-11	at least 10 weeks to less than 11 weeks
11-12	at least 11 weeks to less than 12 weeks
12-13	at least 12 weeks to less than 13 weeks
13-14	at least 13 weeks to less than 14 weeks
14-15	at least 14 weeks to less than 15 weeks
15-16	at least 15 weeks to less than 16 weeks
16-17	at least 16 weeks to less than 17 weeks
17-18	at least 17 weeks to less than 18 weeks
18-19	at least 18 weeks to less than 19 weeks
19-20	at least 19 weeks to less than 20 weeks
20-21	at least 20 weeks to less than 21 weeks
21-22	at least 21 weeks to less than 22 weeks
22-23	at least 22 weeks to less than 23 weeks
23-24	at least 23 weeks to less than 24 weeks
24-25	at least 24 weeks to less than 25 weeks
25-26	at least 25 weeks to less than 26 weeks
26-27	at least 26 weeks to less than 27 weeks
27-28	at least 27 weeks to less than 28 weeks
28-29	at least 28 weeks to less than 29 weeks
29-30	at least 29 weeks to less than 30 weeks
30+	more than 30 weeks

Some time bands are cumulative which means that all [PATIENTS](#) who have been waiting within the time band or more should be included in the count. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

For example, a [PATIENT](#) who has been waiting 35 weeks should be included in the count for 26 plus weeks, 31 plus weeks and 35 plus weeks time bands:

If the count is cumulative it is expressed as below:

26+	26 weeks or more
31+	31 weeks or more
35+	35 weeks or more

## PATIENTS WAITING FOR ADMISSION TIME BAND (RETIRED)\_ renamed from PATIENTS WAITING FOR ADMISSION TIME BAND

Change to Data Element: Changed status to Retired, Name, Description

- Retired PATIENTS WAITING FOR ADMISSION TIME BAND
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.P.Pat.PATIENTS\_WAITING\_FOR\_ADMISSION\_TIME\_BAND to

- Changed Description

REFERRAL TO TREATMENT PERIOD COMPLETED BY NON-ADMITTED PATIENT IN LAST 7 DAYS (NOT WITHIN 18 WEEKS) (RETIRED)\_ renamed from REFERRAL TO TREATMENT PERIOD COMPLETED BY NON-ADMITTED PATIENT IN LAST 7 DAYS (NOT WITHIN 18 WEEKS)

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n6
HES item:	
National Codes:	
Default Codes:	

**Notes:**

The number of [REFERRAL TO TREATMENT PERIODS](#) completed during the [REPORTING PERIOD](#) where the [REFERRAL TO TREATMENT PERIOD END DATE](#) was more than 18 weeks after the [REFERRAL TO TREATMENT PERIOD START DATE](#), and the [ACTIVITY](#) which ended the [REFERRAL TO TREATMENT PERIOD](#) was not a [Hospital Provider Spell](#). This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

REFERRAL TO TREATMENT PERIOD COMPLETED BY NON-ADMITTED PATIENT IN LAST 7 DAYS (NOT WITHIN 18 WEEKS) (RETIRED)\_ renamed from REFERRAL TO TREATMENT PERIOD COMPLETED BY NON-ADMITTED PATIENT IN LAST 7 DAYS (NOT WITHIN 18 WEEKS)

Change to Data Element: Changed status to Retired, Name, Description

- Retired REFERRAL TO TREATMENT PERIOD COMPLETED BY NON-ADMITTED PATIENT IN LAST 7 DAYS (NOT WITHIN 18 WEEKS)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.R.Ref.REFERRAL\_TO\_TREATMENT\_PERIOD\_COMPLETED\_BY\_NON-ADMITTED\_PATIENT\_IN\_LAST\_7\_DAYS\_(NOT\_WITHIN\_18\_WEEKS) to Retired.Data\_Dictionary.Data\_Field\_Notes.R.REFERRAL\_TO\_TREATMENT\_PERIOD\_COMPLETED\_BY\_NON-ADMITTED\_PATIENT\_IN\_LAST\_7\_DAYS\_(NOT\_WITHIN\_18\_WEEKS)
- Changed Description

REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (UNKNOWN START DATE) (RETIRED)\_ renamed from REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (UNKNOWN START DATE)

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n7
HES item:	
National Codes:	
Default Codes:	

**Notes:** This item has been retired from the NHS Data Model and Dictionary.

The number of [REFERRAL TO TREATMENT PERIODS](#) completed in the 7 days before the [REPORTING PERIOD END DATE](#), where the [REFERRAL TO TREATMENT PERIOD START DATE](#) is unknown. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (UNKNOWN START DATE) (RETIRED)\_ renamed from REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (UNKNOWN START DATE)

Change to Data Element: Changed status to Retired, Name, Description

- Retired REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (UNKNOWN START DATE)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.R.Ref.REFERRAL\_TO\_TREATMENT\_PERIOD\_COMPLETED\_IN\_LAST\_7\_DAYS\_(UNKNOWN\_START\_DATE) to Retired.Data\_Dictionary.Data\_Field\_Notes.R.REFERRAL\_TO\_TREATMENT\_PERIOD\_COMPLETED\_IN\_LAST\_7\_DAYS\_(UNKNOWN\_START\_DATE)
- Changed Description

REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (WITHIN 18 WEEKS) (RETIRED)\_ renamed from REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (WITHIN 18 WEEKS)

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n7
HES item:	
National Codes:	
Default Codes:	

**Notes:** This item has been retired from the NHS Data Model and Dictionary.

The number of [REFERRAL TO TREATMENT PERIODS](#) completed in the 7 days before the [REPORTING PERIOD END DATE](#), where the [REFERRAL TO TREATMENT PERIOD END DATE](#) was within 18 weeks of the [REFERRAL TO TREATMENT PERIOD START DATE](#). The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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**REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (WITHIN 18 WEEKS) (RETIRED)\_** renamed from REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (WITHIN 18 WEEKS)

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Change to Data Element: Changed status to Retired, Name, Description

- Retired REFERRAL TO TREATMENT PERIOD COMPLETED IN LAST 7 DAYS (WITHIN 18 WEEKS)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.R.Ref.REFERRAL\_TO\_TREATMENT\_PERIOD\_COMPLETED\_IN\_LAST\_7\_DAYS\_(WITHIN\_18\_WEEKS) to Retired.Data\_Dictionary.Data\_Field\_Notes.R.REFERRAL\_TO\_TREATMENT\_PERIOD\_COMPLETED\_IN\_LAST\_7\_DAYS\_(WITHIN\_18\_WEEKS)
- Changed Description

---

**REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE (RETIRED)\_** renamed from REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE

---

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	see DATE
HES item:	
National Codes:	
Default Codes:	

**Notes:** This item has been retired from the NHS Data Model and Dictionary.

This is the **DATE** that a **SERVICE REQUEST** which is NOT subject to the 18 week waiting time target, would exceed 18 weeks wait from the **REFERRAL TO TREATMENT PERIOD START DATE** of the associated **REFERRAL TO TREATMENT PERIOD**. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

The **REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE** is the 127th day after the **REFERRAL TO TREATMENT PERIOD START DATE** (which is day zero). Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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**REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE (RETIRED)\_** renamed from REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE

---

Change to Data Element: Changed status to Retired, Name, Description

- Retired REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.R.Ref.REFERRAL\_TO\_TREATMENT\_PERIOD\_EXCEEDS\_18\_WEEKS\_DATE to Retired.Data\_Dictionary.Data\_Field\_Notes.R.REFERRAL\_TO\_TREATMENT\_PERIOD\_EXCEEDS\_18\_WEEKS\_DATE
- Changed Description

---

**REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED IN LAST 7 DAYS (RETIRED)\_** renamed from REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED IN LAST 7 DAYS

---

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n7
HES item:	
National Codes:	
Default Codes:	

**Notes:** This item has been retired from the NHS Data Model and Dictionary.

This is the number of **REFERRAL TO TREATMENT PERIODS** during the **REPORTING PERIOD** with no **REFERRAL TO TREATMENT PERIOD END DATE**, where the **REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE** was passed during the 7 days before the **REPORTING PERIOD END DATE**. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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**REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED IN LAST 7 DAYS (RETIRED)\_** renamed from REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED IN LAST 7 DAYS

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Change to Data Element: Changed status to Retired, Name, Description

- Retired REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED IN LAST 7 DAYS
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.R.Ref.REFERRAL\_TO\_TREATMENT\_PERIOD\_EXCEEDS\_18\_WEEKS\_DATE\_PASSED\_IN\_LAST\_7\_DAYS to Retired.Data\_Dictionary.Data\_Field\_Notes.R.REFERRAL\_TO\_TREATMENT\_PERIOD\_EXCEEDS\_18\_WEEKS\_DATE\_PASSED\_IN\_LAST\_7\_DAYS
- Changed Description

---

**REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED TOTAL (RETIRED)\_** renamed from REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED TOTAL

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Change to Data Element: Changed status to Retired, Name, Description

Format/length:	n7
HES item:	
National Codes:	
Default Codes:	

**Notes:** This item has been retired from the NHS Data Model and Dictionary.

This is the number of [REFERRAL TO TREATMENT PERIODS](#) with no [REFERRAL TO TREATMENT PERIOD END DATE](#) where the [REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE](#) has passed. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

This includes those counted in [REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED IN LAST 7 DAYS](#) as well as those whose date passed more than 7 days ago. Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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## REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED TOTAL (RETIRED)\_ renamed from REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED TOTAL

---

Change to Data Element: Changed status to Retired, Name, Description

- Retired REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS DATE PASSED TOTAL
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.R.Ref.REFERRAL\_TO\_TREATMENT\_PERIOD\_EXCEEDS\_18\_WEEKS\_DATE\_PASSED\_TOTAL to Retired.Data\_Dictionary.Data\_Field\_Notes.R.REFERRAL\_TO\_TREATMENT\_PERIOD\_EXCEEDS\_18\_WEEKS\_DATE\_PASSED\_TOTAL
- Changed Description

---

## REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS TIME BAND (RETIRED)\_ renamed from REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS TIME BAND

---

Change to Data Element: Changed status to Retired, Name, Description

Format/length:	an7
HES item:	
National Codes:	
Default Codes:	

**Notes:** This item has been retired from the NHS Data Model and Dictionary.

These are the time bands of the number of weeks until a [PATIENT's](#) wait for treatment would exceed 18 weeks. The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

**Permitted National Codes:** Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

unknown	Patients with unknown <a href="#">REFERRAL TO TREATMENT PERIOD START DATE</a>
>6-8	Patients whose wait for treatment will exceed 18 weeks in more than 6 and up to and including 8 weeks
>4-6	Patients whose wait for treatment will exceed 18 weeks in more than 4 and up to and including 6 weeks
>2-4	Patients whose wait for treatment will exceed 18 weeks in more than 2 and up to and including 4 weeks
>1-2	Patients whose wait for treatment will exceed 18 weeks in more than 1 and up to and including 2 weeks
0-1	Patients whose wait for treatment will exceed 18 weeks in 0 and up to and including 1 week

**Guidance for calculating days until 18 weeks wait for treatment is exceeded:**

The [REFERRAL REQUEST RECEIVED DATE](#) is day zero in the [REFERRAL TO TREATMENT PERIOD](#). Therefore:

[PATIENTS](#) who are reported in the >6-8 weeks time band are those who have 43 to 56 days until 18 weeks wait for treatment is exceeded at the [REPORTING PERIOD END DATE](#)

[PATIENTS](#) who are reported in the >4-6 weeks time band are those who have 29 to 42 days until 18 weeks wait for treatment is exceeded at the [REPORTING PERIOD END DATE](#)

[PATIENTS](#) who are reported in the >2-4 weeks time band are those who have 15 to 28 days until 18 weeks wait for treatment is exceeded at the [REPORTING PERIOD END DATE](#)

[PATIENTS](#) who are reported in the >1-2 weeks time band are those who have 8 to 14 days until 18 weeks wait for treatment is exceeded at the [REPORTING PERIOD END DATE](#)

[PATIENTS](#) who are reported in the 0-1 weeks time band are those who have 1 to 7 days until 18 weeks wait for treatment is exceeded at the [REPORTING PERIOD END DATE](#)

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## REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS TIME BAND (RETIRED)\_ renamed from REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS TIME BAND

---

Change to Data Element: Changed status to Retired, Name, Description

- Retired REFERRAL TO TREATMENT PERIOD EXCEEDS 18 WEEKS TIME BAND
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.R.Ref.REFERRAL\_TO\_TREATMENT\_PERIOD\_EXCEEDS\_18\_WEEKS\_TIME\_BAND to Retired.Data\_Dictionary.Data\_Field\_Notes.R.REFERRAL\_TO\_TREATMENT\_PERIOD\_EXCEEDS\_18\_WEEKS\_TIME\_BAND
- Changed Description

---

## REFERRAL TO TREATMENT PERIOD INCOMPLETE WITHIN TIME BAND (NON-ADMITTED PATIENTS) (RETIRED)

---

Change to Data Element: New Data Element

This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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#### REMOVALS OTHER THAN ADMISSION (DAY CASE) (RETIRED)\_ renamed from REMOVALS OTHER THAN ADMISSION (DAY CASE)

---

Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	n10
HES Item:	
National Codes:	
Default Codes:	

**Notes:**

~~REMOVALS OTHER THAN ADMISSION (DAY CASE)~~ is the total ~~REMOVALS OTHER THAN ADMISSION~~ where the ~~INTENDED MANAGEMENT~~ for the ~~ELECTIVE ADMISSION LIST ENTRY~~ is ~~'PATIENT not to stay in hospital over night'~~. This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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#### REMOVALS OTHER THAN ADMISSION (DAY CASE) (RETIRED)\_ renamed from REMOVALS OTHER THAN ADMISSION (DAY CASE)

---

Change to Data Element: Changed status to Retired, Name, Description

- Retired REMOVALS OTHER THAN ADMISSION (DAY CASE)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.R.Reg.REMOVALS\_OTHER\_THAN\_ADMISSION\_(DAY\_CASE) to Retired.Data\_Dictionary.Data\_Field\_Notes.R.REMOVALS\_OTHER\_THAN\_ADMISSION\_(DAY\_CASE)
- Changed Description

---

#### REMOVALS OTHER THAN ADMISSION (ORDINARY) (RETIRED)\_ renamed from REMOVALS OTHER THAN ADMISSION (ORDINARY)

---

Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	n10
HES Item:	
National Codes:	
Default Codes:	

**Notes:**

~~REMOVALS OTHER THAN ADMISSION (ORDINARY)~~ is the total ~~REMOVALS OTHER THAN ADMISSION~~ where the ~~INTENDED MANAGEMENT~~ for the ~~ELECTIVE ADMISSION LIST ENTRY~~ is National Code ~~'PATIENT to stay in hospital for at least one night'~~. This item has been retired from the NHS Data Model and Dictionary.

The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

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#### REMOVALS OTHER THAN ADMISSION (ORDINARY) (RETIRED)\_ renamed from REMOVALS OTHER THAN ADMISSION (ORDINARY)

---

Change to Data Element: Changed status to Retired, Name, Description

- Retired REMOVALS OTHER THAN ADMISSION (ORDINARY)
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.R.Reg.REMOVALS\_OTHER\_THAN\_ADMISSION\_(ORDINARY) to Retired.Data\_Dictionary.Data\_Field\_Notes.R.REMOVALS\_OTHER\_THAN\_ADMISSION\_(ORDINARY)
- Changed Description

---

#### REMOVALS OTHER THAN ADMISSION (RETIRED)\_ renamed from REMOVALS OTHER THAN ADMISSION

---

Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	n10
HES Item:	
National Codes:	
Default Codes:	

**Notes:**

~~REMOVALS OTHER THAN ADMISSION~~ is the total number of ~~PATIENTS~~ classified as booked admissions or ~~WAITING LIST~~ admissions to be admitted to a ~~Hospital Provider Spell~~, who were removed from an ~~ELECTIVE ADMISSION LIST~~ within the ~~REPORTING PERIOD~~ for reasons other than admission.

It includes private ~~PATIENTS~~ and ~~PATIENTS~~ who are ~~Overseas Visitors~~, it excludes elective planned admissions and ~~Suspended Patients~~. This item has been retired from the NHS Data Model and Dictionary.

It is the total of number of removals from elective admission for PATIENTS where: The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

- and
- the ELECTIVE ADMISSION LIST REMOVAL REASON is National Code 2 'PATIENT admitted as an emergency for the same condition' or 3 'PATIENT died' or 4 'PATIENT removed for other reasons'
- and
- the ELECTIVE ADMISSION LIST REMOVAL REASON is within the period of the REPORTING PERIOD START DATE and the REPORTING PERIOD END DATE  
Within the REPORTING PERIOD includes where the DATE is the same as the START DATE or END DATE
- and
- no ELECTIVE ADMISSION SUSPENSION DETAIL has been recorded  
or  
if recorded, the LIST SUSPENSION END DATE is before the ELECTIVE ADMISSION LIST REMOVAL DATE i.e. no period of suspension is still on-going at the DATE of removal. Where no LIST SUSPENSION END DATE has been recorded then the period of suspension is still active and should be excluded from the count
- and
- the ELECTIVE ADMISSION TYPE is National Code 11 'Waiting list admission' or 12 'Booked admission'

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## REMOVALS OTHER THAN ADMISSION (RETIRED)\_ renamed from REMOVALS OTHER THAN ADMISSION

Change to Data Element: Changed status to Retired, Name, Description

- Retired REMOVALS OTHER THAN ADMISSION
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.R.Reg.REMOVALS\_OTHER\_THAN\_ADMISSION to Retired.Data\_Dictionary.Data\_Field\_Notes.R.REMOVALS\_OTHER\_THAN\_ADMISSION
- Changed Description

## WAITING FOR ADMISSION INTENDED MANAGEMENT (RETIRED)\_ renamed from WAITING FOR ADMISSION INTENDED MANAGEMENT

Change to Data Element: Changed status to Retired, Name, Description

Format/Length:	m†
HES Item:	
National Codes:	
Default Codes:	

### Notes:

WAITING FOR ADMISSION INTENDED MANAGEMENT is a grouping for specified INTENDED MANAGEMENT.

When the INTENDED MANAGEMENT matches the requirements of the specified WAITING FOR ADMISSION INTENDED MANAGEMENT for the sub-group within the data set, the PATIENT should be included in the count providing all the other criteria of the count are also met. This item has been retired from the NHS Data Model and Dictionary.

~~Permitted National Codes:~~ The last live version of this item is available in the November 2013 release of the NHS Data Model and Dictionary.

- Ordinary admission equivalent to INTENDED MANAGEMENT 'PATIENT to stay in hospital at least one night'
- Day case admission equivalent to INTENDED MANAGEMENT 'PATIENT not to stay in hospital overnight'
- Ordinary admission and day case admission equivalent to INTENDED MANAGEMENT 'PATIENT to stay in hospital at least one night' or 'PATIENT not to stay in hospital overnight'

Access to this version can be obtained by emailing [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk) with "NHS Data Model and Dictionary - Archive Request" in the email subject line.

## WAITING FOR ADMISSION INTENDED MANAGEMENT (RETIRED)\_ renamed from WAITING FOR ADMISSION INTENDED MANAGEMENT

Change to Data Element: Changed status to Retired, Name, Description

- Retired WAITING FOR ADMISSION INTENDED MANAGEMENT
- Changed Name from Data\_Dictionary.Data\_Field\_Notes.W.WAITING\_FOR\_ADMISSION\_INTENDED\_MANAGEMENT to Retired.Data\_Dictionary.Data\_Field\_Notes.W.WAITING\_FOR\_ADMISSION\_INTENDED\_MANAGEMENT
- Changed Description

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