

## Authoritative dataset of GP and Dental Practices

July 2014

### Name of dataset: GP and Dental Practices

#### 1. Summary:

A complete and authoritative dataset of medical practices is currently missing from data.gov.uk. Having a list of medical practices is vital to foster excellence in health care on several dimensions, for example to:

- [ give patients an informed freedom of choice
- [ help health care professionals locate each other
- [ allow businesses, software developers, data analysts and activists to build solutions to improve services

There are other sources where such data can be found, such as the Health and Social Care Information Centre (HSCIC) or the NHS Choices datasets pages; however, none of these sources is authoritative or has a clearly defined process for keeping the dataset up to date.

#### **ODUG recommends that:**

- [ ***the Department of Health establish an ongoing process to build, update and maintain on data.gov.uk an authoritative dataset of medical practices and operating practitioners, drawing on the datasets made available by HSCIC and NHS Choices***
- [ ***the dataset lists both GP and Dental practices and include data such as, but not limited to, practice details, opening times, location, e-mail address, status (for closed practices), telephone number***
- [ ***the dataset contains the patient acceptance criteria for each practice (for example, the catchment area where applicable)***
- [ ***the dataset contains a list of practitioners, so that a link between the practice and the practitioner(s) can be established***
- [ ***the dataset be refreshed monthly***
- [ ***the dataset provide a stable unique identifier for each practice, so that they can be referred to unambiguously in other datasets; Government guidelines recommend that this should be a URL (although not necessarily a URL that can be resolved)***
- [ ***the dataset should be ODI Open Data Certified and a Standard Level certificate be attained within 6 months***

## 2. Context

A dataset about GP practices and GPs is currently available from the HSCIC and the NHS Choices web pages. Both datasets present some limitations. Specifically:

- [ the NHS Choices website claims the files are updated daily, whereas the HSCIC provides monthly and quarterly amendments
- [ neither organisation provides a clear statement on how their datasets are assembled and updated
- [ the NHS Choices is released under OGL, while the HSCIC dataset is not open data, specifically not permitting the use of data “*for the purpose of promoting commercial products or services to the public*” [1]
- [ the branding of the NHS Choices dataset as a “Freedom Of Information” dataset is troubling from an Open Data perspective, mainly for its “on demand” nature: a FOI data release, being a reactive response to a request, does not establish an ongoing process; while data release under an Open licence often comes proactively from the publishing entity, which in doing so creates a sustainable data update procedure
- [ there is a growing demand from both patients’ rights groups and activists for the data to be published as open data
- [ an increasing number of Data Requests received on data.gov.uk are from individuals interested in both the research and business aspects of the dataset, including for marketing purposes, pointing to the absence of a truly authoritative dataset
- [ there are an increasing number of apps using health-related data; for example, “Induction” [2] provides contact numbers and bleeps for any hospital in the country; developers of such apps often report they need to work with multiple sources of available data and would prefer a single, well documented, authoritative source

## 3. Benefits of the data and of open release

The release of this data would:

- [ give patients an informed freedom of choice
- [ reduce replication of important data in multiple places, to help healthcare professionals, commissioning groups, local authorities, and other public sector organisations locate GPs in a consistent way. This data is critical in patient care, allowing hospital staff to contact primary care staff
- [ allow businesses, software developers, data analysts and activists to build methods to help improve patient services
- [ deliver strong economic growth opportunities, including allowing SMEs who wish to build/sell products and services to GP Practices to carry out market research

- [ help the Department of Health experiment with the establishment of an internal process for the creation, update and maintenance of a dataset on data.gov.uk
- [ allow cross-referencing of data for research purposes, for example with other medical datasets such as HES
- [ supply a centrally maintained core reference dataset. Health service suppliers are essential for the majority of services and applications that make use of health data, along with others (e.g. services for urban planning, “find a home” applications, and wherever the distance from a health service provider is important for decision making.
- [ close several data requests received through data.gov.uk (1 in 2012-2013 and 4 in 2013-2014).

#### **4. Concerns and risks around an open data release**

- [ GP’s individual concerns about privacy – although they are all required to be on the General Medical Council register<sup>1</sup>.
- [ GP’s concerns about service levels expected by the community, which will be more transparent.

---

<sup>1</sup>[http://www.gmc-uk.org/doctors/register/gp\\_register.asp](http://www.gmc-uk.org/doctors/register/gp_register.asp)

## Annex A

### A.1 References

[1] HSCIC web site: <http://systems.hscic.gov.uk/data/ods/guidance/responsibility>

[2] Induction <http://induction-app.com/>

### A.2 ODUG Key Benefits and Data Theme Fit

#### Key Benefits

Data release goals rated in the scope of ODUG key benefit areas.

	Key Benefits			
	1	2	3	4
Public Service Efficiency				X
Economic Growth		X		
Social Benefits			X	
Transparency				X

#### Data Theme Fit

Data Request rated in the scope of ODUG key data themes.

	Level of fit to each theme								
	1	2	3	4	5	6	7	8	9
Connective Reference Data							X		
Education				X					
Environmental	X								
Financial	X								
Health									
Land and Property	X								
Orgs and Companies						X			
Social							X		
Transport			X						
	Not at all		Some		Applies		Fully applies		Single goal