

About you

Please provide some information about yourself. We will use this information to make sure we are achieving a satisfactory response across all of our target audiences.

1. Is this a co-ordinated response on behalf of a specific organisation or group?

Yes No

If Yes, please specify the organisation's name: The Royal College of Ophthalmologists

2. Is this response on behalf of an SRO or group responsible for a national patient-level data set?

Yes No

If Yes, please specify the data set: National Cataract Data Set

3. Please choose the description that best describes the type of organisation you work for:

Other [please specify below] Medical Royal College/Professional Organisation

4. Please select the area that best describes your role:

Clinical Information Management (including data analysis) Information Technology / Services General Management Administrative Research Campaigning Member of the public Other [please specify below]

Other area

5. If you are happy to be contacted so that we can follow up your response, please provide your email address:

Beth.barnes@rcophth.ac.uk

6. If you would like to be notified when the outcome of the consultation is available, please provide your email address:

Beth.barnes@rcophth.ac.uk

The questions on this page relate to the purpose, scope and background of the De-Identification Data Items.

Please read the [Consultation Summary Document](#) or the information found in the 'Read More' sections on this page, before answering these questions.

7. Are the four purposes clear and easy to understand?

This proposed information standard will ensure that the main commissioning data sets (CDS) and other specified national patient-level data sets that flow from providers to NHS Digital, and that are used for commissioning purposes within the NHS, contain a consistent set of data items for the following purposes:

1. Enabling NHS Digital to create a consistent commissioning pseudonym for an individual patient in data set records pertaining to that patient. This will be delivered by the patient NHS Number for most records, but will use additional identifiers where the NHS Number is not accurate or available.
2. Enabling NHS Digital to disseminate specific data within patient-level data flows to commissioning data recipients to support invoice validation.
3. Enabling NHS Digital to create derivations based on date of birth and postcode of usual address. For example, to calculate the patient's age at the time of the activity.
4. Supplying NHS Digital with derivations based on patient date of birth and postcode of usual address for those patients records where identifiers have been withheld by the provider for legal or other reasons.

Yes No

If No, please specify below why this is the case and what further detail should be provided to improve the clarity of purpose:

Reasons items are not clear

8. Is the scope of the requirement clear and easy to understand?

Data sets in scope of this specification fulfil the following criteria:

- current or future nationally-defined and at patient-level
- mandated (or will be) by an information standard
- used to support NHS commissioning purposes and activities
- flow from providers to NHS Digital for processing.

Yes No

If No, please specify below why this is the case and what further detail should be provided to improve the clarity of the scope of the requirement:

Reasons scope is not clear

9. Are the background information and reasons for the requirement clear and easy to understand?

Background and Reason for the Requirement

This requirement is aligned to National Information Board (NIB) Domain H (Data Outcomes for Research and Oversight) and is designed to ensure that innovative uses of data for commissioning activities can be properly maintained and supported when the various information governance (IG) controls for commissioning data flows, supported by NHS Digital's Data Services Platform (DSP), become operational.

The Health and Social Care Act 2012 and other legislation require commissioners to assess the value, quality and effectiveness of the services they commission. The provision of anonymised patient-level data will support commissioners in meeting this obligation.

The current temporary measures, implemented through the approved applications under Regulations enabled by section 251 of the NHS Act 2006 (usually referred to as Section 251), allow commissioners to use either an NHS Number or a date of birth or a postcode in certain circumstances. These temporary arrangements are due to expire at the end of March 2017.

After this date the main identifiers in national patient-level data sets: NHS Number, Date of Birth, Date of Death and Postcode of Usual Address, will need to be transformed by NHS Digital into a consistent pseudonym and age-related and postcode-related derivations respectively within the data sets that it disseminates to legitimate recipients for commissioning purposes.

Other provider-specific created identifiers, such as Local Patient Identifiers and Event Identifiers, will be included in data disseminations unless they are withheld for sensitive reasons. Identifiers are used to identify unique individuals within a health care provider and are also required for specific commissioning purposes.

These derivations and other controls will support commissioners in meeting their legal obligation to use the minimum amount of data necessary in order to continue to perform their statutory duties whilst still maintaining patient privacy. Work has already commenced within NHS Digital's Data Services for Commissioning Regional Offices (DSCROs) to implement this capability on a regional basis before 1 April 2017, with the Data Services Platform providing a national capability during 2017/18.

The new pseudonym will be used to link records across and between data sets, to support the new Models of Care and integration agendas introduced by the Five Year Forward View and related policy documents. Multiple derivations based on Date of Birth and Postcode will support age-related and geographical analysis.

Most commissioning activities can be undertaken in the absence of patient confidential data, but it is important that consistent patient, activity and status identifiers are present in all commissioning data flows in order to mitigate the risks that:

- patient objections will not be observed
- pseudonyms are not allocated consistently or are assigned multiple times
- records are not accurately anonymised and linked appropriately across data sets.

These exist because:

- around 1 in 20 events has insufficient data completeness or is missing an NHS Number
- around 1 in 100 events has the potential for a different pseudonym to be wrongly assigned the same person.

These figures are sourced from the Secondary Uses Service Extract Mart (SEM) Accident and Emergency (A&E) data set for the financial year 2014 to 2015. It is a relatively mature data set, indicating that less-established data sets may hold greater data quality challenges. Analysis of SEM A&E data also suggests that approximately 10% of records may benefit from further matching and around 6% of NHS Number errors may be resolved by DIDI implementation.

Analysis has shown that the impact of not receiving a consistent pseudonym disproportionately affects patients from lower income demographics, people from ethnic minorities and other disadvantaged groups. This impact may skew commissioning data analyses and any commissioning decisions based on these with a consequent risk that these patients may not receive the health care services that they need.

In the majority of cases the new pseudonym will be based on the supplied validated NHS Number and it is important that providers continue to trace their data using PDS and supply validated NHS Number data at high levels of completeness. Where an NHS Number has been submitted, then providers do not need to submit Patient Name and Patient Usual Address (but do need to submit all of the other DIDI fields).

However, the reasons listed above describe situations where an NHS Number will not be immediately present (if at all) in data flows to the DSP. In these situations the DIDI will be used within DSP to support as part of secondary PDS-tracing and further patient matching algorithms which will be carried out centrally on submitted data to ensure that unique individuals can be identified consistently and so receive the same pseudonym. This will reduce the incidence of false and non-matches when using linked data sets to support commissioning analysis and help mitigate the risk described above.

Yes No

If No, please specify below why this is the case and what further detail should be provided to improve clarity of either the background information or the reason for the requirement:

Reasons the background information is not clear

10. Do you think that any of the data sets identified as being in scope of the requirement should be excluded from the list?

Yes No

If Yes, please identify which data sets should be excluded and then outline why below.

	Exclude
Assuring Transformation	Assuring Transformation Exclude <input type="checkbox"/>
Children and Young People's Health Services Data Set	Children and Young People's Health Services Data Set Exclude <input type="checkbox"/>
Commissioning Data Sets (CDS)	Commissioning Data Sets (CDS) Exclude <input type="checkbox"/>
Critical Care Minimum Data Set	Critical Care Minimum Data Set Exclude <input type="checkbox"/>
Diagnostic Imaging Data Set	Diagnostic Imaging Data Set Exclude <input type="checkbox"/>
Improving Access to Psychological Therapies Data Set	Improving Access to Psychological Therapies Data Set Exclude <input type="checkbox"/>
Maternity Services Data Set	Maternity Services Data Set Exclude <input type="checkbox"/>
Mental Health Services Data Set	Mental Health Services Data Set Exclude <input type="checkbox"/>
National Cancer Waiting Times Monitoring Data Set	National Cancer Waiting Times Monitoring Data Set Exclude <input type="checkbox"/>
National Childhood Measurement Central Return	National Childhood Measurement Central Return Exclude <input type="checkbox"/>
Neonatal Critical Care Minimum Data Set	Neonatal Critical Care Minimum Data Set Exclude <input type="checkbox"/>
Paediatric Critical Care Minimum Data Set	Paediatric Critical Care Minimum Data Set Exclude <input type="checkbox"/>
Sexual and Reproductive Health Activity Data Set	Sexual and Reproductive Health Activity Data Set Exclude <input type="checkbox"/>

Please provide your reasons for excluding:

11. Please review the list of data sets identified as being "potentially in scope" of the requirement and let us know whether they should be added to the "in scope" list:

	Include	Don't Include	No preference
Cataract Data Set	Cataract Data Set Include <input checked="" type="checkbox"/>	Cataract Data Set Don't Include <input type="checkbox"/>	Cataract Data Set No preference <input type="checkbox"/>
Diabetes Audit Data Set	Diabetes Audit Data Set Include <input type="checkbox"/>	Diabetes Audit Data Set Don't Include <input type="checkbox"/>	Diabetes Audit Data Set No preference <input type="checkbox"/>
Diabetic Retinopathy Screening Data Set	Diabetic Retinopathy Screening Data Set Include <input checked="" type="checkbox"/>	Diabetic Retinopathy Screening Data Set Don't Include <input type="checkbox"/>	Diabetic Retinopathy Screening Data Set No preference <input type="checkbox"/>
National Drug Treatment Monitoring System Data Set	National Drug Treatment Monitoring System Data Set Include <input type="checkbox"/>	National Drug Treatment Monitoring System Data Set Don't Include <input type="checkbox"/>	National Drug Treatment Monitoring System Data Set No preference <input type="checkbox"/>
Neonatal Data Set	Neonatal Data Set Include <input type="checkbox"/>	Neonatal Data Set Don't Include <input type="checkbox"/>	Neonatal Data Set No preference <input type="checkbox"/>
Radiotherapy Data Set	Radiotherapy Data Set Include <input type="checkbox"/>	Radiotherapy Data Set Don't Include <input type="checkbox"/>	Radiotherapy Data Set No preference <input type="checkbox"/>
Renal Data Set	Renal Data Set Include <input type="checkbox"/>	Renal Data Set Don't Include <input type="checkbox"/>	Renal Data Set No preference <input type="checkbox"/>
Systemic Anti-Cancer Therapy Data Set	Systemic Anti-Cancer Therapy Data Set Include <input type="checkbox"/>	Systemic Anti-Cancer Therapy Data Set Don't Include <input type="checkbox"/>	Systemic Anti-Cancer Therapy Data Set No preference <input type="checkbox"/>
Trauma Audit and Research Network Notification Data Set	Trauma Audit and Research Network Notification Data Set Include <input type="checkbox"/>	Trauma Audit and Research Network Notification Data Set Don't Include <input type="checkbox"/>	Trauma Audit and Research Network Notification Data Set No preference <input type="checkbox"/>

Where you have selected data sets for inclusion, please provide your reasons below:

Data sets to add to the scope with reasons why

Cataract Data Set is the basis for an NCAPOP National Audit.

Diabetic Retinopathy Screening Data Set underpins the national diabetic retinopathy screening service.

12. Are there any other national data sets which should be added to the scope of this requirement?

Yes No

If Yes, please specify which ones should be included and why:

13. Do you think any of the De-Identification Data Items are unnecessary for the stated purposes and should be excluded?

Yes No

If Yes, please identify which data items should be excluded and then specify why in the text box below

	Exclude
NHS Number	NHS Number Exclude <input type="checkbox"/>
NHS Number Status Indicator Code	NHS Number Status Indicator Code Exclude <input type="checkbox"/>
Patient Name	Patient Name Exclude <input type="checkbox"/>
Patient Usual Address	Patient Usual Address Exclude <input type="checkbox"/>
Postcode of Usual Address	Postcode of Usual Address Exclude <input type="checkbox"/>
Withheld Identity Reason	Withheld Identity Reason Exclude <input type="checkbox"/>
Local Patient Identifier	Local Patient Identifier Exclude <input type="checkbox"/>
Organisation Code (Local Patient Identifier) or Organisation Identifier (Local Patient Identifier)	Organisation Code (Local Patient Identifier) or Organisation Identifier (Local Patient Identifier) Exclude <input type="checkbox"/>

	Exclude
Organisation Code (Code of Provider) or Organisation Identifier (Code of Provider)	Organisation Code (Code of Provider) or Organisation Identifier (Code of Provider) Exclude <input checked="" type="checkbox"/>
Activity Date	Activity Date Exclude <input type="checkbox"/>
Age at Activity Date	Age at Activity Date Exclude <input type="checkbox"/>
Person Birth Date	Person Birth Date Exclude <input type="checkbox"/>
Person Stated Gender Code	Person Stated Gender Code Exclude <input type="checkbox"/>
Person Phenotypic Sex	Person Phenotypic Sex Exclude <input type="checkbox"/>
General Medical Practice Code (Patient Registration)	General Medical Practice Code (Patient Registration) Exclude <input checked="" type="checkbox"/>
Organisation Code (Code of Commissioner) or Organisation Identifier (Code of Commissioner)	Organisation Code (Code of Commissioner) or Organisation Identifier (Code of Commissioner) Exclude <input checked="" type="checkbox"/>
Organisation Code (Residence Responsibility) or Organisation Identifier (Residence Responsibility)	Organisation Code (Residence Responsibility) or Organisation Identifier (Residence Responsibility) Exclude <input type="checkbox"/>

Data items which are unnecessary and reasons why

Organisation Code (Code of Provider) or Organisation Identifier (Code of Provider)

General Medical Practice Code (Patient Registration)

Organisation Code (Code of Commissioner) or Organisation Identifier (Code of Commissioner)

These items should be retained as available for analysis in order to allow comparative audits.

14. Do you think that there are any additional new data items, not currently specified within the NHS Data Model and Dictionary, that could support the objectives of this requirement and which should be added to the list of De-Identification Data Items?

Yes No

If Yes, please identify which new data items could be added and specify why below

New data item 1

Reasons for inclusion of new data item

Review patients who require chronic disease monitoring frequently suffer as a result of delays to follow up visits and there is clear evidence of a proportion of such individuals coming to harm as a consequence of these delays. There is not data item available to track the intended date for review which means that this problem remains hidden from view. There is broad support from this College and the Academy of Medical Royal Colleges for this data item.

New data item 2

Reasons for inclusion of new data item

New data item 3

Reasons for inclusion of new data item

The questions on this page are for current submitters of data. If they don't apply to you please [move to the next page](#).

At this stage we would like to understand the impact on your organisation in relation to the central introduction of the De-Identification Data Items (DIDI) and their subsequent incorporation into national data sets.

We would like you to consider the impact in two ways:

- for those data sets we have set as being IN SCOPE
- for those data sets we have set as being POTENTIALLY IN SCOPE.

Please identify the ones your organisation submits and then for each of those, scroll down the page to find the relevant impact matrix. Please provide a quick assessment of impact, using the following:

- Business process - Extra hours human resource required to change and operate revised business processes to submit the data set
- Data Collection system - System upgrade and running costs
- Data Extraction system - System upgrade and running costs
- Data Processing system - System upgrade and running costs
- Data Transmission system - System upgrade and running costs

We would also like you to consider whether having these items as standard in national data sets will have any local benefit.

Note: please only comment on data sets your organisation currently submits.

15. My organisation submits:

IN SCOPE

- Assuring Transformation
- Children and Young People's Health Services Data Set
- Commissioning Data Sets
- Critical Care Minimum Data Set
- Diagnostic Imaging Data Set
- Improving Access to Psychological Therapies Data Set
- Maternity Services Data Set
- Mental Health Services Data Set
- National Cancer Waiting Times Monitoring Data Set
- National Childhood Measurement Central Return
- Neonatal Critical Care Minimum Data Set
- Paediatric Critical Care Minimum Data Set
- Sexual and Reproductive Health Activity Data Set

Please tick all that apply

POTENTIALLY IN SCOPE

- Cataract Data Set

- Diabetes Audit Data Set
- Diabetic Retinopathy Screening Data Set
- National Drug Treatment Monitoring System Data Set
- Neonatal Data Set
- Radiotherapy Data Set
- Renal Data Set
- Systemic Anti-Cancer Therapy Data Set
- Trauma Audit and Research Network Notification Data Set

Please tick all that apply

16. Assuring Transformation:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

17. Cataract Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

18. Children and Young People's Health Services Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>

	No Impact	Low Impact	Medium Impact	High Impact
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

19. Commissioning Data Sets (CDS):

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

20. Critical Care Minimum Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>

	No Impact	Low Impact	Medium Impact	High Impact
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

21. Diabetes Audit Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

22. Diabetic Retinopathy Screening Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

23. Diagnostic Imaging Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>

	No Impact	Low Impact	Medium Impact	High Impact
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

24. Improving Access to Psychological Therapies Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

25. Maternity Services Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>

	No Impact	Low Impact	Medium Impact	High Impact
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

26. Mental Health Services Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

27. National Cancer Waiting Times Monitoring Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

28. National Childhood Measurement Central Return:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>

	No Impact	Low Impact	Medium Impact	High Impact
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

29. National Drug Treatment Monitoring System Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

30. Neonatal Critical Care Minimum Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>

	No Impact	Low Impact	Medium Impact	High Impact
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

31. Neonatal Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

32. Paediatric Critical Care Minimum Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

33. Radiotherapy Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>

	No Impact	Low Impact	Medium Impact	High Impact
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

34. Renal Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

35. Sexual and Reproductive Health Activity Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>

	No Impact	Low Impact	Medium Impact	High Impact
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

36. Systemic Anti-Cancer Therapy Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input checked="" type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

37. Trauma Audit and Research Network Notification Data Set:

	No Impact	Low Impact	Medium Impact	High Impact
Business Process	Business Process No Impact <input type="radio"/>	Business Process Low Impact <input type="radio"/>	Business Process Medium Impact <input type="radio"/>	Business Process High Impact <input type="radio"/>
Data Collection System	Data Collection System No Impact <input type="radio"/>	Data Collection System Low Impact <input type="radio"/>	Data Collection System Medium Impact <input type="radio"/>	Data Collection System High Impact <input type="radio"/>
Data Extraction System	Data Extraction System No Impact <input type="radio"/>	Data Extraction System Low Impact <input type="radio"/>	Data Extraction System Medium Impact <input type="radio"/>	Data Extraction System High Impact <input type="radio"/>
Data Processing System	Data Processing System No Impact <input type="radio"/>	Data Processing System Low Impact <input type="radio"/>	Data Processing System Medium Impact <input type="radio"/>	Data Processing System High Impact <input type="radio"/>
Data Transmission System	Data Transmission System No Impact <input type="radio"/>	Data Transmission System Low Impact <input type="radio"/>	Data Transmission System Medium Impact <input type="radio"/>	Data Transmission System High Impact <input type="radio"/>

38. Please provide any comments you may have about your reasons for making the above choices:

impact-comments

39. Will your modifications to systems and processes to implement De-Identification Data Items also facilitate their inclusion in locally-defined patient-level commissioning data?

Yes No

If No, please specify why:

40. Once agreed, will it be reasonable to include NHS NUMBER STATUS INDICATOR CODE in all in-scope data sets?

Yes No

If No, please identify which data sets would be problematic and specify why:

The questions on this page about implementation are to be answered by anyone with an interest in the proposed introduction of this information standard.

41. Do you agree with the proposed implementation strategy?

Proposed Implementation Strategy and Timescales

The De-Identification Data Items will be applied across Health and / or Adult Social Care to support a general business need, and consequently there is a need to define at a high level how they should be implemented, when this *should* start ('commencement date') and when this *must* be completed to the required conformance criteria ('completion date').

Three categories of national data sets are in-scope for implementation:

1. Existing nationally-defined data sets, mandated by an information standards, flowing to and processed by NHS Digital, and disseminated to recipients for NHS commissioning purposes.
2. Proposed new data sets currently within the SCCI Development process for new information standards, collections or extractions.
3. Any future data set proposals not currently within the SCCI Development process and submitted as an idea to SCCI after the DIDI information standard commencement date.

All new data set proposals under category three above will have to include the final agreed list of DIDI in the data set's requirements specification for any idea submitted to SCCI after the commencement date. The SCCI secretariat will also make sure that idea submitters are aware of the impending information standard for DIDI, before the standard is published, so that idea submitters can take account of it in their data set proposal.

Consultation has already commenced with Senior Responsible Owners (SROs), or their representatives, for data flows in category two above and will continue for all other data sets currently within the SCCI development process. This consultation will assess the level of DIDI compliance within the proposed data set's actual or planned requirements specification and agree a realistic and feasible commencement date for the DIDI information standard which will give the SRO time to ensure that the proposed data set's requirements specification includes all of the DIDI before the Full technical Regulation is approved by SCCI. Current discussions suggest that the DIDI information standard commencement date will be no earlier than 1 October 2017.

Consultation has already commenced with the relevant Information Asset Owners (IAOs) for all of the in-scope data sets. These discussions will be used to help define a realistic and achievable completion date for the relevant national data set to include all of the DIDI in line with its maintenance strategy. Each IAO must provide resource as part of the maintenance cycle of the data set to comply with this information standard. Current discussions suggest that the DIDI information standard completion date will be no earlier than 31 March 2019. This is in line with the timescales within the current DSP release roadmap.

The inclusion and completeness of DIDI in any locally-defined flows of patient-level data submitted by providers to NHS Digital's DSP for commissioning purposes will be managed by the data landing capabilities within the DSP. They will also be subject to the relevant terms and conditions laid out in the Information Schedule of the NHS England Standard Contract agreed between a provider and a commissioner. Commissioners will be supported to use the powers of the Standard Contract to encourage providers to include DIDI in locally-defined commissioning patient-level data flows.

Yes No

If No, please specify why:

42. Is the suggested commencement date of 1 October 2017 realistic?

Yes No

If No, please specify why:

43. Is the suggested completion date of 31 March 2019 realistic?

Yes No

If No, please specify why:

44. Can you think of any barriers to the implementation of this information standard?

Yes No

If Yes, please specify below:

45. Do you have any views on the impact on providers of implementing DIDI in the national data sets they currently submit?

This question should only be answered by those respondents who DO NOT submit any of the in-scope or potentially in-scope national data sets.

Yes No

If Yes, please specify below:

The proposed De-Identification Data Items information standard requires the collection and flow of personal confidential data.

On that basis please could you also answer the questions on this page.

46. How would you best describe your level of Information Governance expertise?

Expert knowledge Good knowledge Reasonable knowledge Limited knowledge
 No knowledge

47. Do you think that there are any significant new privacy risks associated with the proposed standard?

Yes No

If Yes, please elaborate, identifying any mitigating security measures where possible:

48. Could the aims of the proposed standard be achieved without the collection and flow of personal confidential information?

Yes No

If Yes, please elaborate:

49. Could the aims of the standard be achieved without the sharing of personal confidential information with NHS Digital?

Yes No

If Yes, please elaborate:

50. Are the proposals regarding collection and flow of personal confidential information proportionate to the expected benefits?

Yes No

If No, please elaborate:

51. Will the proposal result in your organisation collecting more personal confidential information than you do currently?

Yes No Not applicable

If Yes, please elaborate:

The College is a provider of an NCAPOP audit. Access to these additional data will allow for example assessment of the completeness of participation in the audit.

52. Please provide any further comments or suggestions you have about this proposed information standard:

Any other comments

The current system of needing to gain exemption from section 251 is unworkable and unfit for purpose in terms of running national quality improvement audits.

