



Health & Social Care
Information Centre

Data Quality Maturity Index

Introduction and Methodology

Published 24 May 2016



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Introduction

Data Quality Tools

Data Quality Maturity Index

The Data Quality Maturity Index (DQMI) is a new quarterly publication intended to highlight the importance of data quality in the NHS. It provides data submitters with timely and transparent information about their data quality. The first publication focuses on the quality of a set of core data items identified by a National Information Board (NIB) working group as being important to commissioners and regulators. Future versions of the DQMI will be refined based on stakeholder feedback, and further DQMIs will be developed to include additional data items and datasets submitted nationally by providers.

This DQMI is a data quality value index based on the completeness and validity of the core data items agreed by NIB working group. These include NHS number, date of birth, gender, postcode, speciality and consultant. For a full list please refer to the table on page 7.

The first publication of the DQMI (24 May 2016) will be based on calendar year 2015 data. Subsequent publications will expand the index to include quarterly data from 2016/17 onwards. The first publication includes data from the following datasets:

- Admitted Patient Care
- Outpatient
- Accident and Emergency
- Mental Health Services
- Improving Access to Psychological Therapies
- Diagnostic Imaging

Data Quality Reporting Tool Prototype

A Data Quality Reporting Tool Prototype is available for use alongside the DQMI. The aim of the Reporting Tool is to provide stakeholders with the detailed information they require to investigate any issues behind DQMI scores. Access to this level of detail also provides an opportunity for users to compare quality across the datasets they submit in one place, and to benchmark themselves against peers.

Performance Evidence Framework

The HSCIC suggests a supportive Performance Evidence Framework designed to help data providers to improve their level of data quality by enhancing their own local processes. This framework has been used successfully in an Acute Trust environment, leading to an improved understanding of the importance of data quality alongside an improvement in the quality of data itself.

These tools can be accessed from the [HSCIC website data quality page](#).

Key Drivers

Health and Social Care Act 2012

Section 266 of the Health and Social Care Act 2012 states that the HSCIC's statutory data quality role is to assess the extent to which the data it collects meets applicable published standards and to publish the results of the assessments. In addition, Section 265 of the Act states that the HSCIC may give advice or guidance on data quality relating to the collection, analysis, publication or other dissemination of data and information.

False or Misleading Information

The Francis Inquiry found that false or misleading information, such as inaccurate statements about mortality rates, allows poor and dangerous care to continue.

In response, the Care Act 2014 put in place a new criminal offence applicable to care providers who supply, publish or otherwise make available certain types of information that is false or misleading, where that information is required to comply with a statutory or other legal obligation. The offence also applies to the 'controlling minds' of the organisation, where they have consented or connived in an offence committed by a care provider.

This [guidance](#) sets out the context for the offence and explains how the offence is applied.

Additional Data Quality Information

SUS Validations

SUS XML Validation

SUS can only accept data submitted as [XML](#) (Extensible Markup Language) which is a text based language for encoding structured information. It allows consistent error checking based on [NHS Data Dictionary](#) definitions which are expressed in an XML 'schema'.

Data senders requiring the use of an XML translation service must select one supplier from the list of accredited suppliers before they can submit data to SUS. The terms of this contract are negotiated between the sender organisation and the XML supplier.

When submitted, interchanges are validated against the XML schema. If an interchange passes validation it is transmitted to SUS where additional validations, referred to as 'SUS business rules', are performed to ensure that the data can be processed.

Definitions of the CDS types and validation rules can be found on the NHS Data Dictionary and ISB websites as follows:

- The [NHS Data Dictionary](#) describes the structure and content of each CDS type. It includes codes that denote whether data is mandatory and the level of XML validation (such as whether format or values are validated) and the SUS business rules that are applied to each data item.
- XML schemas are also available on the [NHS Data Dictionary](#) website:
- Changes to the definitions are documented via Information Standard Notifications (ISNs), formerly known as Data Set Change Notices (DSCNs), which can be found on the ISB website:
 - www.isb.nhs.uk/library/isn
 - www.isb.nhs.uk/library/dscn

SUS Business Rules

Where an interchange fails validation of the business rules, a SUS Interchange Failure Notification is sent to the data submitter and gives the details of the submission and the reason for failure.

The full list of SUS Business rules (rules S1 to S14) are held at the NHS Data Dictionary at [BUSINESS RULES: S - Secondary Uses Service Business Rules](#).

More Information

Please refer to the [SUS Guidance](#) webpage which is a resource for SUS users covering topics such as sending and extracting data, help with set-up and access to system support.

Dataset Specific Detail

Additional information about the data quality assurance and reporting processes for individual datasets included within the DQMI is available on the HSCIC website:

- Commissioning Datasets (Admitted Patient Care, Outpatients, Accident & Emergency) - <http://www.hscic.gov.uk/sus/dataservices>

- Diagnostic Imaging Dataset - <http://www.hscic.gov.uk/did>
- Improving Access to Psychological Therapies (IAPT) – <http://www.hscic.gov.uk/iaptmonthly>
- Mental Health Services Dataset (MHSDS) – <http://www.hscic.gov.uk/mhsds> (please note: information relating to the MHLDDS can be found in the left-hand navigation pane of the web page)

Methodology

Data collection

Only core fields for each of the six datasets are measured within the DQMI. The core fields are outlined in the table below.

Core field name	APC	Outpatients	Accident and Emergency	Diagnostic Imaging Dataset	Mental Health	Improving Access to Psychological Therapies (IAPT)
ACTIVITY TREATMENT FUNCTION CODE	x	x				
ADMINISTRATIVE CATEGORY CODE (ON ADMISSION)	x	x				
ADMISSION DATE (HOSPITAL PROVIDER SPELL)	x					
ADMISSION METHOD (HOSPITAL PROVIDER SPELL)	x					
CARE PROFESSIONAL MAIN SPECIALTY CODE	x	x				
CONSULTANT CODE	x	x				
DISCHARGE DESTINATION CODE (HOSPITAL PROVIDER SPELL)	x					
DISCHARGE METHOD CODE (HOSPITAL PROVIDER SPELL)	x					
ETHNIC CATEGORY	x	x	x	x	x	x
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	x	x	x	x	x	x
NHS NUMBER	x	x	x	x	x	x
NHS NUMBER STATUS INDICATOR CODE	x	x	x	x	x	
ORGANISATION CODE (CODE OF COMMISSIONER)	x	x	x		x	x

Core field name	APC	Outpatients	Accident and Emergency	Diagnostic Imaging Dataset	Mental Health	Improving Access to Psychological Therapies (IAPT)
ORGANISATION CODE (CODE OF PROVIDER)	x					
PATIENT CLASSIFICATION CODE	x					
PERSON BIRTH DATE	x	x	x	x		
PERSON GENDER CODE CURRENT	x	x	x	x	x	x
POSTCODE OF USUAL ADDRESS	x	x	x	x	x	x
PRIMARY DIAGNOSIS (ICD)	x					
SITE CODE (OF TREATMENT)	x	x				
SOURCE OF REFERRAL FOR A and E			x			
SOURCE OF REFERRAL FOR OUT-PATIENTS		x				

Core Field Descriptions

Dataset and Data Item	Plain English Description
Accident and Emergency (A&E)	
ETHNIC CATEGORY	The ethnicity of a person, as specified by the person.
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	The organisation code of the GP Practice that the patient is registered with.
NHS NUMBER	Unique patient identifier.
NHS NUMBER STATUS INDICATOR CODE	A code indicating the status of an NHS number in relation to a Personal Demographic Service (PDS) trace. For example, 'number present but not traced' / 'trace in progress'.
ORGANISATION CODE (CODE OF COMMISSIONER)	The organisation code of the original commissioner to support the National Tariff Payment System.
PERSON BIRTH DATE	A person's date of birth.
PERSON GENDER CODE CURRENT	A person's current gender.
POSTCODE OF USUAL ADDRESS	The postcode of the address nominated by the patient where the address association type is 'Main Permanent Residence' or 'Other Permanent Residence'.
SOURCE OF REFERRAL FOR A and E	The source of referral of each Accident and Emergency episode.

Dataset and Data Item	Plain English Description
Admitted Patient Care (APC)	
ACTIVITY TREATMENT FUNCTION CODE	Recorded to report the specialised service within which the patient is treated.
ADMINISTRATIVE CATEGORY CODE (ON ADMISSION)	Used to record the administrative category code at the start of the Hospital Provider Spell.
ADMISSION METHOD (HOSPITAL PROVIDER SPELL)	The method of admission to a hospital provider spell. For example, elective, emergency, maternity.
CARE PROFESSIONAL MAIN SPECIALTY CODE	The specialty in which the consultant is contracted or recognised. Main speciality classifies clinical work divisions more precisely for a limited number of specialties.
CONSULTANT CODE	A code uniquely identifying a consultant.
DISCHARGE DATE (HOSPITAL PROVIDER SPELL)	The date a patient was discharged from a hospital provider spell.
DISCHARGE DESTINATION CODE (HOSPITAL PROVIDER SPELL)	The destination of a patient on completion of a Hospital Provider Spell, or a note that the patient died or was a still birth.
DISCHARGE METHOD CODE (HOSPITAL PROVIDER SPELL)	The method of discharge from a Hospital Provider Spell. For example, discharged on clinical advice / discharged by him/herself.
ETHNIC CATEGORY	The ethnicity of a person, as specified by the person.
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	The organisation code of the GP Practice that the patient is registered with.
NHS NUMBER	Unique patient identifier.
NHS NUMBER STATUS INDICATOR CODE	A code indicating the status of an NHS number in relation to a Personal Demographic Service (PDS) trace. For example, 'number present but not traced' / 'trace in progress'.
ORGANISATION CODE (CODE OF COMMISSIONER)	A code which identifies the organisation commissioning health care.
ORGANISATION CODE (CODE OF PROVIDER)	A code which identifies the organisation acting as a Health Care Provider.
PATIENT CLASSIFICATION CODE	A coded classification of patients who have been admitted to a Hospital Provider Spell. For example, inpatient, day case.
PERSON BIRTH DATE	A person's date of birth.
PERSON GENDER CODE CURRENT	A person's current gender.
POSTCODE OF USUAL ADDRESS	The postcode of the address nominated by the patient where the address association type is <i>'Main Permanent Residence'</i> or <i>'Other Permanent Residence'</i> .
PRIMARY DIAGNOSIS (ICD)	The International Classification of Diseases (ICD) code used to identify the primary diagnosis. This is the patient diagnosis for: i. the main condition treated or investigated during the relevant episode of healthcare, and ii. where there is no definitive diagnosis, the main symptom, abnormal findings or problem.
SITE_CODE(OF_TREATMENT)	This identifies the organisation site within the organisation on which the patient was treated, since facilities may vary on different hospital sites.

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Dataset and Data Item	Plain English Description
SOURCE OF ADMISSION CODE (HOSPITAL PROVIDER SPELL)	The source of admission to a Hospital Provider Spell or a Nursing Episode when the patient is in a Hospital Site or a Care Home.
Outpatients (OP)	
ACTIVITY TREATMENT FUNCTION CODE	Used by the Secondary Uses Service to derive the Healthcare Resource Group 4. Failure to correctly populate this data element is likely to result in an incorrect Healthcare Resource Group, usually associated with lower levels of healthcare resource.
ADMINISTRATIVE CATEGORY CODE	Used to record the administrative type for the stay. For example, NHS patient / private patient / overseas patient.
CARE PROFESSIONAL MAIN SPECIALTY CODE	The specialty in which the consultant is contracted or recognised. Main speciality classifies clinical work divisions more precisely for a limited number of specialties.
CONSULTANT CODE	A code uniquely identifying a consultant.
ETHNIC CATEGORY	The ethnicity of a person, as specified by the person.
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	The organisation code of the GP Practice that the patient is registered with.
NHS NUMBER	Unique patient identifier.
NHS NUMBER STATUS INDICATOR CODE	A code indicating the status of an NHS number in relation to a Personal Demographic Service (PDS) trace. For example, 'number present but not traced' / 'trace in progress'.
ORGANISATION CODE (CODE OF COMMISSIONER)	The organisation code of the original commissioner to support the National Tariff Payment System.
PERSON BIRTH DATE	A person's date of birth.
PERSON GENDER CODE CURRENT	A person's current gender.
POSTCODE OF USUAL ADDRESS	The postcode of the address nominated by the patient where the address association type is 'Main Permanent Residence' or 'Other Permanent Residence'.
SITE CODE (OF TREATMENT)	This identifies the organisation site within the organisation on which the patient was treated, since facilities may vary on different hospital sites.
SOURCE OF REFERRAL FOR OUT-PATIENTS	The source of referral of each Consultant Out-Patient Episode.
Diagnostic Imaging Dataset (DID)	
ETHNIC CATEGORY	The ethnicity of a person, as specified by the person.
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	The organisation code of the GP Practice that the patient is registered with.
NHS NUMBER	Unique patient identifier.
NHS NUMBER STATUS INDICATOR CODE	A code indicating the status of an NHS number in relation to a Personal Demographic Service (PDS) trace. For example, 'number present but not traced' / 'trace in progress'.
PERSON BIRTH DATE	A person's date of birth.

Dataset and Data Item	Plain English Description
PERSON GENDER CODE CURRENT	A person's current gender.
POSTCODE OF USUAL ADDRESS	The postcode of the address nominated by the patient where the address association type is 'Main Permanent Residence' or 'Other Permanent Residence'.
Improving Access to Psychological Therapies (IAPT)	
ETHNIC CATEGORY	The ethnicity of a person, as specified by the person.
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	The organisation code of the GP Practice that the patient is registered with.
NHS NUMBER	Unique patient identifier.
ORGANISATION CODE (CODE OF COMMISSIONER)	The organisation code of the original commissioner to support the National Tariff Payment System.
PERSON GENDER CODE CURRENT	A person's current gender.
POSTCODE OF USUAL ADDRESS	The postcode of the address nominated by the patient where the address association type is 'Main Permanent Residence' or 'Other Permanent Residence'.
SOURCE OF REFERRAL FOR MENTAL HEALTH	The source of referral to a Mental Health Service.
Mental Health Learning Disability Data Set (MHLDDS)	
ETHNIC CATEGORY	The ethnicity of a person, as specified by the person.
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	The organisation code of the GP Practice that the patient is registered with.
NHS NUMBER	Unique patient identifier.
NHS NUMBER STATUS INDICATOR CODE	A code indicating the status of an NHS number in relation to a Personal Demographic Service (PDS) trace. For example, 'number present but not traced' / 'trace in progress'.
ORGANISATION CODE (CODE OF COMMISSIONER)	The organisation code of the original commissioner to support the National Tariff Payment System.
PERSON GENDER CODE CURRENT	A person's current gender.
POSTCODE OF USUAL ADDRESS	The postcode of the address nominated by the patient where the address association type is 'Main Permanent Residence' or 'Other Permanent Residence'.

Calculation of DQMI

The DQMI is defined as the average proportion of valid and complete records in each field provided.

Example

Data set 1	Number of records	Number of valid complete records	Proportion of records valid and complete
Field 1	2,500	2,400	96%
Field 2	2,500	2,500	100%
Field 3	2,500	2,000	80%

Data set 2	Number of records	Number of valid complete records	Proportion of records valid and complete
Field 1	1,000	900	90%
Field 2	1,000	800	80%
Field 3	1,000	900	90%
Field 4	1,000	1,000	100%

Data set 3	Number of records	Number of valid complete records	Proportion of records valid and complete
Field 1	10,000	10,000	100%
Field 2	10,000	10,000	100%

Data set 4	Number of records	Number of valid complete records	Proportion of records valid and complete
No return	-	-	-

Data set 5	Number of records	Number of valid complete records	Proportion of records valid and complete
No return	-	-	-

Data set 6	Number of records	Number of valid complete records	Proportion of records valid and complete
Field 1	50,000	49,000	98%
Field 2	50,000	49,000	98%
Field 3	50,000	45,000	90%

DQMI	94%
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$$=(96\%+100\%+80\%+90\%+80\%+90\%+100\%+100\%+100\%+98\%+98\%+90\%)/12$$

Appendix 1: Validity Definitions

The following validity definitions apply to the CDS data used in the DQMI for the period stated:

CDS Data Item Validity Definitions for DQMI v1.0 (2015 Calendar Year)

Some global filters are applied against every data item within a dataset. The filters applied are as follows:

APC: Only finished general episodes are counted (CDS type 130).

OP: The counts do not include indication of future appointment (ATTENDED_OR_DID_NOT_ATTEND = '0') or administrative events (FIRST_ATTENDANCE = '5').

A&E: No exclusions are applied to A&E counts.

The following table provides an explanation of how the valid numerators have been calculated.

DATA ITEM	DATASET	VALIDITY DEFINITION
ACTIVITY_TREATMENT_FUNCTION_CODE	APC, OP	Value is present and in list of valid treatment function codes taken from the NHS data dictionary (DD). Includes default codes as valid.
ADMINISTRATIVE_CATEGORY_CODE(ON_ADMISSION)	APC, OP	Value is present and in list of valid administrative category codes taken from the NHS DD. Includes default codes as valid.
ADMISSION_METHOD(HOSPITAL_PROVIDER_SPELL)	APC	Value is present and in list of valid admission method codes taken from the NHS DD. Includes default codes as valid.
ADMISSION_DATE(HOSPITAL_PROVIDER_SPELL)	APC	Value is present, is 8 characters in length and admission date is before or the same as the discharge date.
CARE_PROFESSIONAL_MAIN_SPECIALTY_CODE	APC, OP	Value is present and in list of valid main specialty codes taken from the NHS DD. Includes default codes as valid.

DATA ITEM	DATASET	VALIDITY DEFINITION
CONSULTANT_CODE	APC, OP	Value is present and starts 'CD', is 8 characters in length and the third character is numeric OR value starts with a C, D, M, N, H, A or G and is 8 characters in length and the second character is numeric.
DECIDED_TO_ADMIT_DATE	APC	Value is present, is 8 characters in length and decision to admit date is before or the same as the admission date.
DISCHARGE_DESTINATION_CODE(HOSPITAL_PROVIDER_SPELL)	APC	Value is present and in list of valid discharge destination codes taken from the NHS DD. Includes default codes as valid.
DISCHARGE_METHOD_CODE(HOSPITAL_PROVIDER_SPELL)	APC	Value is present and in list of valid discharge method codes taken from the NHS DD. Includes default codes as valid.
ETHNIC_CATEGORY	APC, OP, A&E	Value is present and in list of valid ethnic category codes taken from the NHS DD. Includes default codes as valid.
GENERAL_MEDICAL_PRACTICE_CODE(PATIENT_REGISTRATION)	APC, OP, A&E	Value is present and in list of valid GP practice codes taken from Organisation Data Service (ODS) data where the code was active at any stage during 2015. Includes Scottish, English, Welsh and NI GP practice codes.
NHS NUMBER	APC, OP, A&E	Value is present and passes the modulus 11 check digit test for NHS numbers. Where the Secondary Uses Service (SUS) has set the NHS_NUMBER_STATUS_INDICATOR_CODE to '91' or the treatment function code is '360' (sensitive patients where SUS blanks submitted patient identifiers) these records are counted as valid.
NHS_NUMBER_STATUS_INDICATOR_CODE	APC, OP, A&E	Value is present and in list of valid NHS number status indicator codes taken from the NHS DD.

DATA ITEM	DATASET	VALIDITY DEFINITION
ORGANISATION_CODE(CODE_OF_COMMISSIONER)	APC, OP, A&E	Value is present and in list of valid commissioner codes where the commissioner organisation code was open on the ODS data at the time the activity ended. Includes codes ending '...00' as valid, so 01J and 01J00 would both be considered valid. The list of valid commissioners is based upon NHS England's Commissioner Assignment Method Flow Chart document.
PATIENT_CLASSIFICATION_CODE	APC	Value is present and in list of valid patient classification codes taken from the NHS DD. Includes default codes as valid.
PERSON_BIRTH_DATE	APC, OP, A&E	Value is present and is 8 characters in length. Where the Secondary Uses Service (SUS) has set the NHS_NUMBER_STATUS_INDICATOR_CODE to '91' or the treatment function code is '360' (sensitive patients where SUS blanks submitted patient identifiers) these records are counted as valid.
PERSON_GENDER_CODE_CURRENT	APC, OP, A&E	Value is present and in list of valid gender codes taken from the NHS DD. Includes default codes as valid.
POSTCODE_OF_USUAL_ADDRESS	APC, OP, A&E	Value is present and in list of valid postcodes where a postcode was open at any point between 1st January 2015 and 31st December 2015. Where the Secondary Uses Service (SUS) has set the NHS_NUMBER_STATUS_INDICATOR_CODE to '91' or the treatment function code is '360' (sensitive patients where SUS blanks submitted patient identifiers) these records are counted as valid. Note that the treatment function code '360' filter is not applicable for A&E.
PRIMARY_DIAGNOSIS(ICD)	APC	Value is present and in list of valid ICD10 4th edition diagnosis codes.
SITE_CODE(OF_TREATMENT)	APC, OP	Value is present and in list of valid provider site codes taken from the ODS data. Includes default codes as valid.

DATA ITEM	DATASET	VALIDITY DEFINITION
SOURCE_OF_REFERRAL_FOR_A&E	A&E	Value is present and in list of valid source of referral for A&E codes taken from the NHS DD.
SOURCE_OF_REFERRAL_FOR_OUTPATIENTS	OP	Value is present and in list of valid source of referral for OP codes taken from the NHS DD.

Other validity definitions

Validity definitions for the other datasets included in the DQMI can be obtained by contacting the relevant dataset teams through enquiries@hscic.gov.uk.

Appendix 2: Caveats

Caveats
General
All percentages are displayed to 1 decimal place
Providers with an All Records denominator <100 are not reported in the DQMI because small volumes of data have high levels of volatility.
<p>Organisation codes labelled “**INVALID - SEE METHODOLOGY DOCUMENT FOR CAVEAT” in the DQMI mean that the organisation is either:</p> <ol style="list-style-type: none"> a. closed before the time period the data it is reporting on <p>or</p> <ol style="list-style-type: none"> b. not registered or recognised by the Organisation Data Service (ODS)
<p>There are two commissioner codes present on the DQMI list of providers:</p> <ol style="list-style-type: none"> 1. 08A (AE only): This data is now being submitted via provider code AH601; 08A will drop off in the next set of published data 2. 09Y (OP only): Data for this commissioner is intermittent. However there is no data present for them after September 2015. It is possible that they may now be submitting under a valid provider code. The HSCIC is continuing to investigate
The reporting tool prototype time series functionality will not work with the current data as there is only one time period, i.e. calendar year 2015
Admitted Patient Care (APC)
The denominator for primary diagnosis only looks at episodes within finished spells as coding often occurs only after discharge. This is the same methodology used for the SUS DQ dashboards for the same field.
Diagnostic Imaging Dataset (DID)
Postcodes have only been checked for valid formats, they have not been checked against the national postcode directory in corporate reference data to ensure they are an actual postcode.
DID Data is extracted from Radiology Information Systems (RIS). Not all RIS have access to full patient information, so not all trusts are able to submit fields such as NHS Number Status Indicator within their DID extract. However, data providers are requested to include these fields where they are available. This may account for the poor coverage of that particular field.
Trusts have up to 6 months to submit data relating to a particular month. For instance, anything relating to January can be submitted up to the end of July. Therefore, it is possible that the DQMI figures relating to November 2015 and December 2015, for which the deadline for final amendment is 31 st May 2016 and 30 th June 2016 respectively, could change.
Improving Access to Psychological Therapies (IAPT)
Suppression of small numbers, i.e. those less than 5, had been applied to the source IAPT data. Suppressed values were set to 2 in the DQMI to compensate for this. All other values have been rounded to the nearest 5.
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION) has a different denominator to other IAPT measures as all Scottish GP codes (beginning with S) are excluded from the IAPT data quality assessment.

Caveats

Mental Health Learning Disability Data Set (MHLDDS)

Only contains data for the period January to November 2015 due to the transition from collecting data for MHLDDS to collecting data for the Mental Health Services Dataset (MHSDS)

Suppression of small numbers, i.e. those less than 5, had been applied to the source MHLDDS data. Suppressed values were set to 2 in the DQMI to compensate for this. All other values have been rounded to the nearest 5.

GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION) has a different denominator to other MHLDDS measures as all Scottish GP codes (beginning with S) are excluded from the MHLDDS data quality assessment.

ORGANISATION CODE (CODE OF COMMISSIONER) can have a different denominator to the demographic data items as it is taken from a different table in the dataset. The demographic information is submitted as part of the Master Patient Index table and is stored separately from the Commissioner History data which includes a record for each commissioner assignment.

Published by the Health and Social Care Information Centre

This publication may be requested in large print or other formats.

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