WELSH HEALTH CIRCULAR

Llywodraeth Cymru
Welsh Government

Issue Date: 06 November 2015

<u>STATUS</u>: **COMPLIANCE**

<u>CATEGORY</u>: **QUALITY & SAFETY**

Title: Operational standards for use of the NHS Number

Date of Expiry / Review
Review through Information Quality Initiative until 2020

For Action by:
Chief Executives of Health Boards and Trusts

Action required by:
Immediately and in phases outlined to 2020.

Sender: Peter Jones

DHSS Welsh Government Contact(s) :
Sally Greenway, Digital Health & Care, Health & Social Services Group, Cathays Park, Cardiff, CF10 3NQ

Email: sally.greenway@wales.gsi.gov.uk

Enclosure(s): DSCN 2015 / 06

Dear Colleague,

Operational standards for use of the NHS Number

The NHS Number is the only national unique patient identifier and is used to help healthcare staff and service providers match patients to their health records. It is a 10-digit number assigned to every individual registered with the NHS in England and Wales.

The consistent use and universal availability of the NHS Number will help enable the NHS to realise the preferred position of having a single record for each patient. Duplicate records lead to the fragmentation of patient information and have potential clinical safety implications.

The use of the NHS Number for management of patient-related data will facilitate improved matching of information to the correct patient. It will be of benefit to all NHS staff who interface with patients in that they can have confidence that they have the correct content for each patient.

Advancements in medical knowledge and technology have resulted in the development of new procedures and services in health care. As procedures have changed so has the organisation of the treatment process. The treatment of a patient requires the involvement of various medical specialists and other health care professionals and happens across a wider range of health care organisational boundaries.

Many departments use separate clinical systems resulting in patient records being held in multiple systems. This poses a clinical risk as each system might contain information that could influence the care the patient receives and there is no one system that contains a complete record of care.

The use of the NHS Number as the unique patient identifier will also help ensure that samples, images and other patient-related tests can be referenced back correctly and inserted into the correct records.

In order to support the care of patients at a range of locations, national information technology systems are drawing legacy data from disparate local systems and this has introduced an additional layer of complexity. Clinicians may require access to previous treatment and patient information from all the former NHS systems. The only unique identifier every clinician will have to enable this is the NHS number; hospital numbers and other system identifiers are not the same across organisations or may be the same but are allocated to different patients.

This issue is compounded by the fact that it is difficult to match records between clinical systems as the demographic records often contain incomplete or poor quality data. In addition, duplicate records for the same patient can also be found within each system, arising from poor operational processes for patient registration and poor information governance, policies and procedures.

To minimise clinical risk any member of staff involved in a patient's care needs to access all relevant information. With systems in their current configuration this is often impossible as patient information is spread across multiple records and multiple clinical systems. There is also reluctance to use the NHS number by front line staff as they consider the hospital number more robust and 'not everyone has an NHS number'. However recent indications are that less than 3% of the population will not have an NHS number.

Various Welsh Health Circulars have been issued concerning use of the NHS Number:

- WHC (98) 60 mandated the use of NHS Number in all minimum datasets from April 2009
- WHC (90) 80 set out the Caldicott requirement to use the NHS Number as the coded identifier
- WHC (2007) 074 provided a reminder of the vital role the NHS Number plays in improved data quality and record linkage and that required that proposals relating to its wider use should be taken through the Wales Information Standards Board.

The National Patient Safety Agency also issued a Safer Practice Notice in 2009 on the "Risk to patient safety of not using the NHS Number as the national identifier for all patients".

The Welsh Information Standards Board (WISB) has now approved a new information standard for the operational use of the NHS number. Full details on the submissions and outcomes can be found in the WISB submissions log. This circular outlines how the NHS number MUST, SHOULD and MAY be used in all information systems which contribute to patient care across the health community. It provides the specification for use of the NHS Number by NHS bodies and by other organisations providing health and care services in Wales in partnership with the NHS. It should be read in conjunction with DSCN 2015 / 06 which specifies in detail each of the system and user requirements.

Implementation of this NHS Number Standard will ensure that all systems which integrate with NHS Wales Informatics Service products are using the NHS number appropriately and that a common identifier will be in place across all systems.

Implementation is in three phases.

1. The first phase includes implementation of the NHS standard for all new NHS Wales procurements.

2. The second phase of the implementation includes the six major NHS Wales Informatics Service Systems and Cardiff and Vale Patient Management System, namely:

   - Myrddin Patient Administration System
   - TrakCare Laboratory Information Management System (LIMS)
   - Radiology Management System (RadIS)
   - Hospital Pharmacy System
   - Welsh Clinical Portal (WCP)
   - Canisc
   - Cardiff & Vale PMS

3. The third phase will cover all remaining applicable systems. These are defined as:

   - All information systems supporting the commissioning or provision of NHS services that hold patient / service user demographic data
   - All information systems supporting the commissioning or provision of health and care services that are used to transfer or otherwise communicate patient

/ service user information with other bodies that commission or provide health and care services in Wales in partnership with the NHS
- All new information systems procured after this standard comes into force

Phase one has immediate effect.
Phase two should be completed by April 2018.
Phase three should be completed by April 2020.

Progress in monitoring implementation will be undertaken within the Information Quality Improvement Initiative.

Any queries on this WHC should be addressed to Sally Greenway at sally.greenway@wales.gsi.gov.uk

Yours sincerely,

Peter Jones
Deputy Director, Digital Health and Care
Department for Health and Social Services