



# NHS Business Partners miniguide

Introductory guidance for NHS-commissioned healthcare providers from the independent and third sectors



# Contents

Section	Description	Page
1	Introduction	4
2	NHS Business Partners programme	4
3	NHS Connecting for Health	5
4	Contracts	6
5	Privacy & Confidentiality Officer (Caldicott Guardian)	7
6	Senior Information Risk Owner	7
7	Information Governance (IG) Assurance	8
8	Organisation Data Services	9
9	Installation of an N3 connection	10
10	NHS Choices	10
11	SNOMED CT	11
12	Commissioning Data Sets	11
13	The NHS Information Centre for health and social care (NHS IC)	12
14	Secondary Uses Service (SUS)	12
15	NHS Number	13
16	NHSmail	13
17	UNIFY2	13
18	Compliance requirements	14
19	Next steps – want to find out more?	14
<hr/> <b>Appendix A</b>		
	Glossary	15

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## 1 Introduction

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The information in this guide is aimed at healthcare providers who are considering providing services under PCT-commissioned NHS standard contracts. In order to provide NHS clinical services, providers will need to comply with a range of Information Management and Technology (IM&T) requirements.

The guide provides an introduction to the issues that need to be considered by the provider when connecting to NHS IT systems and services for the first time.

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## 2 NHS Business Partners programme

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As the NHS has evolved, the range of NHS providers from the independent and third sectors offering NHS-commissioned services and requiring IM&T integration has increased significantly. Recognising the growing importance of these sectors to the NHS, and the need for effective integration with NHS digital systems, NHS Connecting for Health (NHS CFH) introduced the NHS Business Partners programme (previously known as the Independent Sector Healthcare Programme).

The programme exists to provide support and guidance to NHS commissioners and their contracted providers (and their IT system suppliers) with their integration with NHS services and applications.

The NHS Business Partners programme provides guidance, supporting documentation and expertise on integration requirements, from initial contact through to deployment of fully compliant systems.

If you have any questions about the NHS Business Partners programme please contact [businesspartners@nhs.net](mailto:businesspartners@nhs.net) or visit: [www.connectingforhealth.nhs.uk/systemsandservices/businesspartners](http://www.connectingforhealth.nhs.uk/systemsandservices/businesspartners)

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## 3 NHS Connecting for Health

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NHS CFH is maintaining and developing the NHS national IT infrastructure. This includes a number of services and applications, including:

- Electronic patient records – secure services links patient information from different parts of the NHS electronically so that authorised NHS staff and patients have the information they need to make care decisions. There are two elements to electronic patient records: detailed care records (held locally) and summary care records (held nationally).
- Choose and Book - an electronic referral service, offering patients greater choice of hospital or clinic and more convenience in the date and time of their first outpatient appointment in a hospital or clinic.
- Electronic Prescription Service (EPS) – allowing a patient’s prescription to be sent electronically from their GP to the dispenser. This makes prescribing and dispensing safer and more convenient for patients.
- Picture Archiving and Communications System (PACS) – digital x-rays and scans available at the touch of a button for faster, more accurate diagnosis.
- IT supporting GPs, including the Quality Management and Analysis System, support for the Quality and Outcomes Framework and GP2GP record transfer, so health records can be transferred safely and efficiently when a patient changes practice.
- N3 - providing IT infrastructure and broadband connections to link IT systems so patient information can be shared between NHS organisations reliably and securely.
- NHSmail – a secure email and directory service for the NHS, enabling staff to transfer patient information swiftly, safely and efficiently.
- Secondary Uses Service (SUS) - the standard repository for activity for performance monitoring, reconciliation and payments.
- The Spine – the service that supports the NHS CRS and other systems and services, including Choose and Book, EPS and SUS.

A large number of providers from the independent sector are already using NHS services and applications to deliver choice and support seamless patient care. This use is set to increase as more providers from the independent and third sectors are contracted to offer treatment to NHS patients in the future.

Further information on other NHS services and applications can be found at: [www.connectingforhealth.nhs.uk](http://www.connectingforhealth.nhs.uk)

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## 4 Contracts

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NHS Standard Contracts are one of the key methods for contracting with all providers of NHS-commissioned services. Providers are commissioned by PCTs or the National Specialised Commissioning Group for Acute, Community, Mental Health and Ambulance services. These contracts set out the NHS standard terms and conditions of business, including information requirements, and apply to all providers.

Further information can be found using the following links or discussing further with your PCT commissioning department:

NHS Standard Contracts:

[www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_111203](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_111203)

General publication searches:

[www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsLibrary](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsLibrary)

The NHS Business Partners programme at NHS CFH will require written confirmation from each healthcare provider that it has an NHS contract in place to provide NHS services before any access to NHS IT services (e.g. Choose and Book, N3, NHSmail etc) is granted.

Some national services and processes such as the Spine, Choose and Book, Smartcards, Role Based Access Controls, Information Governance (IG) assurance and N3 connections require healthcare providers (in some cases each individual site or individual person) be sponsored by an NHS Authority (generally a PCT commissioner). It is essential that the provider has a clear relationship in place with a local NHS organisation, or individuals who are commissioning their services and who are willing to act as a sponsor.

Engagement with the relevant NHS Authority should be via that Authority's normal procedures for procurement. It should be noted that this may be a lengthy process and should therefore be addressed as early as possible.

Failure to achieve sponsorship is a major cause of delay to provision of NHS services. Please note that you will be required to have sponsorship approval as a requirement for information governance assurance which is a prerequisite for accessing any NHS IT services. The sponsoring NHS Authority is also responsible for providing Registration Authority services and Choose and Book training.

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## 5 Privacy & Confidentiality Officer (Caldicott Guardian)

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All providers of NHS-commissioned services are required to appoint a privacy officer (called a Caldicott Guardian) who should be a board level clinician.

Information relating to this role is available from:

[www.connectingforhealth.nhs.uk/systemsandservices/infogov/caldicott](http://www.connectingforhealth.nhs.uk/systemsandservices/infogov/caldicott)

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## 6 Senior Information Risk Owner

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All organisations providing or supporting NHS services must adhere to the information risk management guidelines mandated for the public sector by the Cabinet Office. This work must be led by an executive board member, termed the Senior Information Risk Owner (SIRO), with effective support throughout the organisation, to ensure that the board recognises and takes appropriate action to manage information risk.

Guidance on what is required can be found in the Information Governance Toolkit at [www.igt.connectingforhealth.nhs.uk](http://www.igt.connectingforhealth.nhs.uk)

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## 7 Information Governance (IG) Assurance

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Whether an organisation already receives services from NHS CFH, or is requesting a service for the first time, it will need to complete an Information Governance Statement of Compliance (IGSoC). The IGSoC replaces all previous agreements. The IGSoC is the agreement between NHS CFH and 'Approved Service Recipients' that sets out the information governance policy and terms and conditions for use of NHS CFH services. Satisfactory completion of the IG assurance process is required before any provider can access NHS IT services.

NHS IG controls are fundamentally designed to ensure the accuracy and traceability of any information stored on NHS systems and to protect the confidentiality of patient information. The IGSoC contains a number of obligations to enable use of NHS CFH services, which aim to preserve the integrity of these services. These obligations should be reviewed carefully before signing, to ensure full compliance.

It is essential that every organisation (including providers, their suppliers and any subcontractors) with access to patient data and NHS systems meets its IGSoC obligations. Detailed information on the IG compliance requirements for non-NHS organisations and the IGSoC step-by-step guide and toolkit can be found using the following web address:

[www.connectingforhealth.nhs.uk/systemsandservices/infogov/igsoc/non-nhs](http://www.connectingforhealth.nhs.uk/systemsandservices/infogov/igsoc/non-nhs)

Please note that providers will be required to have completed the IGSoC application process before an ODS code can be assigned, and attained full IGSoC approval before they can place an order for an N3 connection.

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## 8 Organisation Data Services

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Organisation Data Services (ODS) manages the provision of organisation and site codes for all NHS organisations. It also codes non-NHS organisations that deliver NHS services. ODS codes (previously known as NACs codes) are required in order to configure NHS services and applications such as N3 and Choose and Book and also to facilitate activity reporting.

Non-NHS organisations are coded as either:

- Independent Healthcare Sector Providers (ISHPs) – generally these are large organisations that operate from more than one location and need to use

national services such as N3 and Choose and Book. Each organisation has an ISHP HQ code and distinct ISHP organisations beneath it. This enables the coding of multiple locations and companies.

- Independent Providers (IPs) – small organisations operating from a single location with no need to use Choose and Book etc and organisations such as charities, independent therapists and hospices. ODS code required for financial/administrative reporting purposes only. For more information on IP codes please see: [www.connectingforhealth.nhs.uk/systemsandservices/data/ods/independent](http://www.connectingforhealth.nhs.uk/systemsandservices/data/ods/independent)

Any healthcare provider with a contract to provide NHS services is likely to need to use N3 and Choose and Book as a minimum. Therefore most providers will require an ISHP code.

### How do I get an ODS code?

To request an ODS code, the provider will need to have completed the IG assurance application process (see IG guidance), which is the first step of the IG Statement of Compliance (IGSoC) approval process and is required for access to N3 and national services and applications such as Choose and Book. ODS will not allocate a code until you have registered for IGSoC.

Once the application has been accepted, the IG team will notify ODS that a code can be allocated or the provider can contact the Exeter Helpdesk to request the creation of an ODS code ([exeter.helpdesk@nhs.net](mailto:exeter.helpdesk@nhs.net)) The ODS team will ask a set of questions to ascertain which type of code each provider needs.

If you are not going to need access to N3, Choose and Book etc initially but know that you will in the near future please advise the team.

It is advised that ODS code creation be completed at the earliest opportunity as it will be required ahead of orders being placed for an N3 connection. System suppliers are also likely to need the code early for testing etc.

Codes allocated by ODS are published for use within the NHS. ODS codes are uploaded to the NHS Choices website at [www.nhs.uk](http://www.nhs.uk)

For more information on ODS please visit:

[www.connectingforhealth.nhs.uk/systemsandservices/data/ods](http://www.connectingforhealth.nhs.uk/systemsandservices/data/ods)

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## 9 Installation of an N3 connection

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In order to use NHS systems, all organisations must obtain an N3 connection. There are several methods of connecting to the network so it is worth investigating the most cost-effective option for your organisation's requirements.

Further information on the service and options available can be accessed from [www.connectingforhealth.nhs.uk/systemsandservices/n3](http://www.connectingforhealth.nhs.uk/systemsandservices/n3) or by calling the N3 helpdesk on 0800 0850503.

As a prerequisite for connection, and with potential lead times upwards of 45 working days from acceptance of order to service commencement, it is recommended that the N3 order is placed as early as possible to avoid delay to connection to the NHS services. It should be noted, however, that BT will not action any N3 requests until confirmation of an approved IGSoc is received.

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## 10 NHS Choices

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The NHS Choices website aims to give patients comprehensive information about their healthcare and available treatment choices. The website has been developed to help people make choices about their health, from lifestyle decisions through to choosing an NHS provider.

The site provides a single public "front door" to all NHS online information and services and draws together the knowledge and expertise of:

- The National Library for Health
- NHS Direct
- The NHS Information Centre for Health and Social Care
- The Care and Quality Commission, and many other organisations

Once a new provider has been provided with a registered ODS code, it allows a profile on NHS Choices to be built. Providers should contact NHS Choices to gain log-in details and access in order to develop and update their profile.

NHS Choices can be contacted on: 0845 6504865 or via its website at [www.nhs.uk](http://www.nhs.uk)

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## 11 SNOMED CT®

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SNOMED CT® (Systematised Nomenclature of Medicine Clinical Terms) is the chosen terminology for the NHS in England. It is a clinical computerised language that will be used by all systems operating in the NHS to facilitate communications between healthcare professionals in clear and unambiguous terms. The NHS depends on having a common language for gathering and sharing medical knowledge. SNOMED CT® is being introduced gradually throughout the NHS and will be the language of the NHS CRS. It will reduce the potential for differing interpretation of information and the possibility of errors resulting from traditional paper records.

More information is available at:

[www.connectingforhealth.nhs.uk/systemsandservices/data/snomed](http://www.connectingforhealth.nhs.uk/systemsandservices/data/snomed)

SNOMED CT® is not currently mandated for non-Local Service Provider systems in use within the NHS. However, providers should ensure that their suppliers have clear plans for its introduction.

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## 12 Commissioning Data Sets

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Commissioning Data Sets (CDS), produced in support of commissioning processes, need to be generated by all providers of healthcare delivering secondary care services to the NHS. They are generated by the provider and are processed on a monthly basis by XML formatted messages to SUS for central collation and reporting more information is available at:  
[www.connectingforhealth.nhs.uk/systemsandservices/data/datamodeldictionary](http://www.connectingforhealth.nhs.uk/systemsandservices/data/datamodeldictionary)

Links to SUS for CDS returns can be enabled through the use of specialist middleware providers. At present there are a number of suppliers that are all operating SUS compliant XML translation services. In order to submit CDS returns to SUS, providers will need to implement appropriate middleware from a supplier that has attained the compliance standards for the service. It should be recognised that it can take some time to become familiar with the data dictionary and putting in place processes to generate the required coding. Resources will need to be assigned and sufficient time planned for this critical task. The demonstration of clinical coding capability is a key assurance activity and a requirement of all NHS contracts. CDS data is used to calculate some of the indicators that are published on NHS Choices.

In addition, CDS information is used to support PCT commissioning and contract

management activities, including invoice reconciliation and Payment by Results. Failure to submit CDS information will have contractual implications.

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## 13 The NHS Information Centre for health and social care (NHS IC)

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The NHS IC has developed a set of web pages specifically designed to help new independent sector healthcare providers understand the data and information requirements to be met and the related support services. These can be found at [www.ic.nhs.uk/is](http://www.ic.nhs.uk/is)

The information available was developed with help from a steering group derived from the Independent Sector IT council.

It covers support and guidance to independent and third sector providers on the data they must and can provide to central collections, including CDS returns to Secondary Uses Service, UNIFY2 returns and national clinical audits, and support to improve data quality.

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## 14 Secondary Uses Service (SUS)

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There is a considerable amount of information collected during the provision of care and treatment. SUS is jointly delivered by the NHS IC and NHS CFH and is the standard repository to enable commissioners to performance manage, reconcile and pay for care provided. Providers of NHS-funded care must submit to SUS all the appropriate commissioning datasets as agreed with their commissioners. This is a key requirement of all NHS contracts.

The link below provides further guidance on SUS, including a summary of the reporting application, how to get training and the Role Based Access Control (RBAC) requirements:

[www.connectingforhealth.nhs.uk/systemsandservices/sus/whatsnew/080708.pdf](http://www.connectingforhealth.nhs.uk/systemsandservices/sus/whatsnew/080708.pdf)

For those who need access to SUS and have yet to register, please email: [enquiries@ic.nhs.uk](mailto:enquiries@ic.nhs.uk) or call The NHS IC contact centre on 0845 300 6016, to request log-in details.

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## 15 NHS Number

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The NHS Number is the only national unique patient identifier in operation in the NHS. Using the NHS Number makes it possible to share patient information safely, efficiently and accurately across NHS organisations.

The NHS Number is a required field in data returns (CDS and Mental Health Minimum Data Set). All referrals from the NHS should contain the NHS Number; where they do not, providers should request it from the referring organisation or determine the NHS Number by searching PDS through a PDS-compliant PAS or through the Summary Care Record Application (SCRa).

All services commissioned by the NHS must adhere to the NHS Number Information Standard for Secondary Care, which can be found at:

[www.isb.nhs.uk/docs/instantiations/nhs-number](http://www.isb.nhs.uk/docs/instantiations/nhs-number)

There is supporting guidance available at:

[www.connectingforhealth.nhs.uk/systemsandservices/nhsnumber/staff/guidance](http://www.connectingforhealth.nhs.uk/systemsandservices/nhsnumber/staff/guidance)

Further information on the NHS Number is available at:

[www.connectingforhealth.nhs.uk/nhsnumber](http://www.connectingforhealth.nhs.uk/nhsnumber) and email enquiries can be sent to the NHS Number team at [nhsnumber@nhs.net](mailto:nhsnumber@nhs.net)

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## 16 NHSmail

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NHSmail is the secure email and directory service designed for NHS staff, providing secure transmission of patient identifiable data. All providers will be required to register for NHSmail and will need to discuss this provision with their commissioner. For further information on this service:

[www.connectingforhealth.nhs.uk/systemsandservices/nhsmail](http://www.connectingforhealth.nhs.uk/systemsandservices/nhsmail)

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## 17 UNIFY2

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UNIFY2 is the data collection system used by the Knowledge and Intelligence team in the Department of Health, to collect a wide range of performance information such as waiting times and healthcare activity. The provider must complete and submit UNIFY2 returns as listed in the UNIFY2 information catalogue: [www.icapp.nhs.uk/infocat/default.aspx](http://www.icapp.nhs.uk/infocat/default.aspx)

The UNIFY2 home page can be found at the following address (please note nww access is only permitted once you have an approved IGSoC and N3 connection): <http://nww.unify2.dh.nhs.uk/Unify/interface/homepage.aspx>.

Any queries about the site can be addressed via the UNIFY2 team on [unify@dh.gsi.gov.uk](mailto:unify@dh.gsi.gov.uk).

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## 18 NHS compliance requirements

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In parallel with the achievement of IGSoC compliance and installation of the N3 service, support and guidance will be provided from NHS CFH for the planning of the release and deployment approach for the integration with NHS services and applications.

New and existing services and applications are required to achieve and maintain the standards and requirements specified by NHS CFH for access to, and transfer and storage of, the information required in the delivery and reporting of patient care.

NHS CFH, and agents acting on its behalf, publishes and provides specifications and compliance requirements for NHS services and applications and guidance will be provided throughout the life of these.

For further information on the compliance process please contact: [businesspartners@nhs.net](mailto:businesspartners@nhs.net)

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## 19 Next steps – want to find out more?

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If you would like further information, please contact your commissioner in the first instance. The NHS Business Partners programme can be contacted by emailing: [businesspartners@nhs.net](mailto:businesspartners@nhs.net)

You can also visit the programme web pages at: [www.connectingforhealth.nhs.uk/systemsandservices/businesspartners](http://www.connectingforhealth.nhs.uk/systemsandservices/businesspartners)

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## Appendix A

### Glossary

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CDS	Commissioning Data Sets
EPS	Electronic Prescription Services
GP2GP	GP to GP record transfer
IG	Information Governance
IM&T	Information Management & Technology
LSP	Local Service Provider
N3	National wide area network for the NHS
NHS CFH	NHS Connecting for Health
NHS IC	NHS Information Centre for Health and Social Care
NWCS	NHS Wide Clearing Service
ODS	Organisation Data Services (formerly NACS)
PDS	Personal Demographics Service
QMAS	Quality Management & Analysis System
RA	Registration Authority
RBAC	Role Based Access Control
RTT	Referral to Treatment
SUS	Secondary Uses Service



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