	Summary Care Record - Guidance for central NHAIS demographic data retrieval and management			
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Summary Care Record Guidance for central NHAIS demographic data retrieval and management

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Reviewers:

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Distribution:

SCR website and via SCR communiqué – targeting SHA and PCT SCR teams.

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This is a controlled document.

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1. About this document

1.1 Purpose

This document is to provide the Strategic Health Authorities (SHAs) and Primary Care Trusts (PCTs) undertaking a Public Information Programme (PIP) with appropriate guidance for retrieval of patient demographic data from the central NHAIS team when using the central mail house facility.

1.2 Audience

This document is for those involved in implementing a PIP. Specifically for those who are involved in managing patient demographic data extraction and manipulation from NHAIS systems.

1.3 Content

This document comprises of the following sections/topics

- What is the Summary Care Record and regional PIP?
- What will NHAIS provide?
- What is the business process for retrieving NHAIS data?

2. What is the Summary Care Record and PIP?

2.1 Background

Each PCT undertaking a PIP will be responsible for contacting all patients registered with a GP practice in their area to inform them about the SCR and the choices they have.

The PCTs will require patient demographic data to support the PIP process. This will need to be supplied in a timely, accurate and secure manner. In assessing this requirement NHS CFH reviewed the use of PDS, NSTS and NHAIS, NHAIS was identified as the most accurate and secure source of this information. By using NHAIS to provide an extract of patient demographic data for a PCT this process can be co-ordinated centrally by skilled resource thus reducing risks around data loss, data quality and missing fringe patients.

3. What will NHAIS provide to the SHAs / PCTs?

NHAIS will provide a file or files (extracts) of demographic data of patients over the age of 15 years and 182 days for a specified PCT on a specified date. Further information about the extracts and how they are provided is detailed below.

- NHAIS will provide the file name and location of extract information in a secure manner to the requesting SHA or PCT (via NHS CFH). This will enable the NHAIS user identified by the SHA or PCT to retrieve the relevant files.
- The data extract will be on a PCT basis. NHAIS will create one file per PCT on each NHAIS box where data for that PCT exists. This therefore means there may be more than one file per PCT for retrieval.
- After each extract NHAIS will confirm the location of each PCT file containing patient data and provide the name, number of records in the file and location of that file to NHS CFH.
- The extract will be in the form of a tilde delimited file with carriage return between records (Refer to Appendix A for example).
- Patients with an FP69 status at the time of extraction (because previous correspondence sent to that patient has been returned “undeliverable”) will not be included in the extract file.

NHAIS demographic data retrieval: Business process

3.1 Business Process summary

The Business process is simply defined in the following stages;

- **Set up and planning**
 - Ensure resource is in place to manage the NHAIS extracts
 - Ensure access is in place to NHAIS server(s) for resource to receive and submit data
 - Provide NHAIS extract schedule to CFH / NHAIS
- **Data extraction, retrieval, manipulation and submission**
 - Retrieve NHAIS extract from specified locations
- **Data submission to the mail house**

3.2 Business Process

To reduce data security risk, the extract is initiated and monitored by the NHAIS team, but the SHA/PCT are responsible for accessing the system and managing the resulting file/files of demographic data.

In the table below, where the Organisation is listed as SHA/PCT the SHA/PCT will need to confirm who is responsible for this step, plan for these steps and make the necessary arrangements.

Any queries about NHAIS extracts should be directed to the NHS CFH SCR Interface manager for your SHA

Timeframe (from mailing date)	Organisation	Activity description
SET UP & PLANNING		
-7 weeks	PCT	Confirm data quality at a practice level to ensure the NHAIS extract is as accurate as possible. Confirm reconciliation history for the PCT is adequate.
-7 weeks	SHA / PCT	The data on NHAIS is owned by the PCTs, the SHAs will need to confirm the process for accessing and managing this data with the PCTs. NOTE: All PIPs completed within this process so far, have utilised local NHAIS teams to retrieve, manipulate, validate and pass the data to the mail house.
-7 weeks	SHA / PCT	The SHA needs to ensure adequate data controls are in place prior to the NHAIS data extract. Confirm and approve Information Governance and Data Security processes re: management of patient identifiable data
-7 weeks	SHA/PCT	Identify single individual responsible for data control and management. This role will be responsible for: <ul style="list-style-type: none"> • File location list (provided by NHS CFH) and NHAIS file

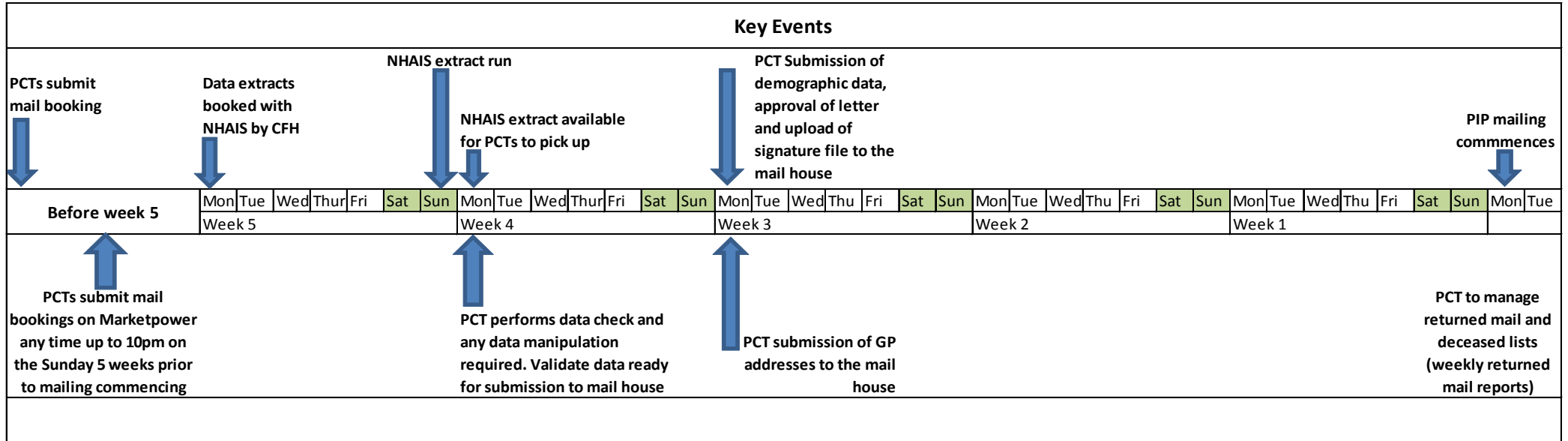
		<ul style="list-style-type: none"> retrieval Information governance and security processes (Please refer to attached guidance on data transfer and disposal for guidance on appropriate management of NHS data. The controls around data management will need to be agreed within each SHA) Data manipulation (as per PCT requirement e.g. GP practice not to be included within the PIP) Quality checks (ensuring data validity & integrity have not been compromised during any extraction processes e.g. lines of address missing) Data import into Excel or Access format if manipulation is required. Data transfer to mailing house (following agreed SHA data management processes and mail house guidance on data transfer)
-5 weeks	SHA/PCT	Confirm NHAIS roles/key users are in place to collect data from the boxes (incl. access, permissions etc)
-5 weeks (or more)	PCT	<p>Enter PIP mailing booking on the MarketPower® system. This must be completed at least 5 weeks prior to the PIP mailing starting to enable enough time for the NHAIS extracts to be scheduled, run and for a PCT to validate the data prior to submission to the mail house.</p> <p>NOTE: CFH .will use the mailing date to derive the NHAIS extract schedule from this information, and a schedule will be provided to the NHS CFH Interface Managers. Each extract will be produced for each mailing 4 weeks prior to the PIP mailing date entered in MarketPower® (giving one week for any manipulation, quality checks and approval by the PCT prior to submission to the central mail house).</p>
-5 weeks	NHS CFH	Confirm extract schedule with national NHAIS team
-5 weeks	National NHAIS	Configure the extract process as per the schedule supplied by CFH
-5 weeks	SHA/PCT	Communicate extract dates and process for handling data to NHAIS key users responsible for retrieving the extract files from the NHAIS boxes
-5 weeks	National NHAIS	Configure the extract process as per the schedule supplied by CFH
-5 weeks	SHA/PCT	Confirm data manipulation requirements (e.g. a specific GP practice which does not need to be PIP'ed).
DATA EXTRACTION AND RETRIEVAL		
-4 weeks	NHAIS	<p>NHAIS will be required to produce extract files by PCT on each NHAIS System. Most NHAIS systems would only produce a single file because all their patients' Practices are within the one SHA. NHAIS sites along the borders between the SHAs would have 2 (or possibly more) files generated.</p> <p>NOTE: The extract may be delayed by local maintenance of NHAIS systems by up to 5 days. This is a low risk but should be considered. In most cases the files will be available the day after the scheduled extraction date.</p>
-4 weeks	NHAIS	Confirm file name and location for each PCT extract to CFH (to include number of records)
-4 weeks	NHS CFH	Confirm file name and location for each PCT extract to SHA / PCT
-4 weeks	SHA/PCT	<p>Retrieve appropriate information from NHAIS boxes as per names and location provided</p> <p>NOTE: please ensure the correct files (detailed in the email which will be sent out the Monday after an extract) are extracted from the NHAIS boxes. The files will be named specifically for the PCT and the date of extract. (i.e. the NHAIS CYPHER-PCTCODE-DATE format).</p>
-4 weeks	SHA/PCT	<p>Quality check – validate record numbers in files and data format</p> <p>The PCT should confirm all required fields are populated within their data file at the point of upload to the mail house. This is required to ensure no data has been accidentally removed as part of any data manipulation and validation exercises performed by the PCT. An example of why this confirmation is required is the potential for the patient's postcode, the last field in each record, to be truncated accidentally as part of the validation process.</p>

-4 weeks	SHA/PCT	<p>Complete any data manipulation required. The recommendation is that manipulation is kept to an absolute minimum to reduce the risk of data corruption.</p> <p>NOTE - To manipulate the data sets, it is recommended that the PCT import the data into Microsoft Access.</p>
-4 weeks	SHA/PCT	<p>The data will be passed to the Mail house in the original tilde delimited format with the original filenames as supplied by national NHAIS with the addition of a version number (i.e. v1), there is no requirement for the PCT to merge the files if more than one file has been produced, each file would be identified by its NHAIS system cipher.</p> <p>All NHAIS files will be passed to the mail house, if no demographic details are required from a file then an empty (zero record) file will be passed to the mail house. This will ensure confirmation that all files have been considered and validated for the mailing.</p> <p>File name format is:</p> <p>NHAIS System Cipher followed by PCT Code followed by Extract Date (in CCYYMMDD format) followed by version number (v1).txt</p> <p>Example: NEW5D720101217v1.txt would be the extract file for PCT 5D7 from the NEW (Newcastle) NHAIS System run on 17th December 20010.</p>
-4 weeks	SHA/PCT	<p>Pass patient demographic information to mail house facility (additional guidance will be provided on the mail house process by CFH in the central mail house guidance document)</p> <p>NOTE: This should be completed 3 weeks prior to the mailing date to provide sufficient time for the mail house to complete its data and printing activities.</p>
-4 weeks	SHA/PCT	<p>Confirm file names and record numbers on the MarketPower® system (refer to SCR central mail house guidance document (section 3.4) for further details)</p>
-4 weeks	Central mail house	<p>Validate received files against names and record numbers provided by the PCT by comparing the details provided on MarketPower® with the information uploaded on to the PCTs secure FTP site</p>

NOTE: Please find an associated process flow attached in Appendix B

3.3 Business process time line

The diagram below shows the key timings for activities that are detailed in the table above.



Appendix A – Example data format for NHAIS extract files

As previously indicated, we propose to have the patient records exported as a “~” (tilde) delimited file. The record format will be as follows:

NHAIS System Cipher (indicating the actual NHAIS System that record came from)~PCT Code~Practice Code~NHS Number~Surname~Forenames~Title~Address Line 1~Address Line 2~Address Line 3~Address Line 4~Address Line 5~Address Line 6 (Postcode)
NHAIS System Cipher (indicating the actual NHAIS System that record came from)~PCT Code~Practice Code~NHS Number~Surname~Forenames~Title~Address Line 1~Address Line 2~Address Line 3~Address Line 4~Address Line 5~Address Line 6 (Postcode)
NHAIS System Cipher (indicating the actual NHAIS System that record came from)~PCT Code~Practice Code~NHS Number~Surname~Forenames~Title~Address Line 1~Address Line 2~Address Line 3~Address Line 4~Address Line 5~Address Line 6 (Postcode)
NHAIS System Cipher (indicating the actual NHAIS System that record came from)~PCT Code~Practice Code~NHS Number~Surname~Forenames~Title~Address Line 1~Address Line 2~Address Line 3~Address Line 4~Address Line 5~Address Line 6 (Postcode)

4. Appendix B – NHAIS data retrieval and management process flow

