

# Request for exclusion of data from national collection

## **Request for exclusion of data from national collection**

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The NHS Commissioning Board (NHS CB) was established on 1 October 2012 as an executive non-departmental public body. Since 1 April 2013, the NHS Commissioning Board has used the name NHS England for operational purposes.

## 1 Introduction

- 1.1 This document sets out guidelines for providers of NHS services who are at risk of being unable to meet mandatory data reporting requirements via Unify2, for example, Referral to Treatment waiting times and diagnostic data (DM01).
- 1.2 The collation and provision of timely and accurate healthcare activity data and information underpins the delivery of high quality healthcare services. This information needs to comply with the required formats and definitions as set out by NHS England, and the Burden Assessment and Advice Service (BAAS).
- 1.3 All providers should therefore ensure that appropriate actions are taken to meet all reporting requirements and should have robust governance arrangements and contingency plans in place to support the appropriate quality and continuing provision of all data returns.
- 1.4 However, in some exceptional circumstances, it may be appropriate for a provider to take the decision for data not to be submitted for inclusion in the national publication of official statistics on the basis of data quality and completeness, and this document sets out the actions and expectation in these scenarios.

## 2 Process for requesting exclusion

- 2.1 In the circumstances where a provider may be unable to meet one or more of the required mandatory information returns, they are required to notify immediately, and at the very latest by the Unify2 provider submission deadline for the relevant month, the NHS TDA<sup>1</sup> (respective NHS TDA Delivery and Development Director) or Monitor (the respective Regional Director). This should be in written form using Part A of the attached template, clearly setting out the following:
  - the cause of the problem preventing submission of accurate data including a clear statement of why the data is not good enough for normal submission;
  - details of mitigating actions taken this month and planned for next month to resolve the problem, with clear lead responsibilities;
  - likely timescale for resolving the problem, including a clear indication of how long the suspension of data will continue;
  - notification that the risk has been recorded in the appropriate risk register.
- 2.2 In parallel to, or shortly after, notifying the NHS TDA or Monitor, providers should inform in writing their lead Clinical Commissioning Group (CCG) and NHS England (both the relevant regional team via normal communication routes and NHS analytical services via either [rttdata@dh.gsi.gov.uk](mailto:rttdata@dh.gsi.gov.uk) or [unify2@dh.gsi.gov.uk](mailto:unify2@dh.gsi.gov.uk)) of the suspension, copying the completed template as appropriate.

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<sup>1</sup> Respective NHS TDA Delivery and Development Director and Monitor Regional Directors' means Director of the region where Trust is located (North, Midlands and East, London or South).

- 2.3 The request for exclusion of data from national publications needs to be repeated for each month that the issues remain unresolved. A blanket agreement with no timescale for resolution will not be granted.

### **3 Decision to request exclusion**

- 3.1 The decision to request the exclusion of data needs to be a decision taken and owned by the Board of an NHS Provider. The expectation is that the plan to resolve, and oversight of, the associated mitigating actions will be a key issue for the Board to monitor closely until the issues are completely resolved.
- 3.2 The decision by a provider not to have their data included in a national publication is a serious one and should not be taken lightly as the likely impact on an organisation can be significant. The provider will be highlighted in any national publications as being unable to submit data. The NHS TDA and Monitor will reflect exclusion from national publication as failing for the indicators affected in their regulatory role.
- 3.3 There will be a range of reasons for providers deciding that data is not of sufficient quality for inclusion and may include:
- serious problems with patient administration systems (PAS), although the expectation is that mandatory reporting will continue during PAS changes;
  - insufficient confidence in the underlying data being reported;
  - provider not in receipt of data.
- 3.4 Importantly, the exclusion of data cannot be used as a means to respond to poor performance.
- 3.5 The NHS Standard Contract sets out (as Service Condition 28) sanctions which commissioners may apply where providers fail to provide data of required quality under the Contract, and commissioners should ensure that they make use, as they deem appropriate, of the contractual levers available to them.

### **4 Oversight of actions to resolve exclusion of data**

- 4.1 Following notification of the exclusion, the provider should agree with the TDA/Monitor and NHS England, via regional tripartite, a process to monitor delivery against the ratified recovery plan using the attached RTT template each month to check progress.
- 4.2 Following resolution of the problem the provider should notify the NHS TDA or Monitor and NHS England regional tripartite by completing Part B of the attached template when they submit the monthly Unify2 return. Other than in exceptional circumstances, the returns for the periods of exclusion should be re-submitted using the established revisions process. Where retrospective reporting of excluded data is in jeopardy the provider must agree a course of action with the NHS TDA or Monitor, NHS England and lead CCG.

- 4.3 In the first instance TDA/Monitor will seek assurance from the provider Board that data is of sufficient quality to be included in the national publication of official statistics and this should be clearly set out in Part B of the template. In exceptional circumstances, where it is felt that further assurance would be beneficial, TDA/Monitor will work with the provider to identify a third party to undertake a data quality review. Such a review would be supported by assurance from the Intensive Support Team.
- 4.4 Where the cause of exclusion is due to the reporting systems not functioning as intended (e.g. implementation of a new Patient Administration System), TDA/Monitor might require the PAS supplier to confirm that the technical issues have been dealt with sustainably.