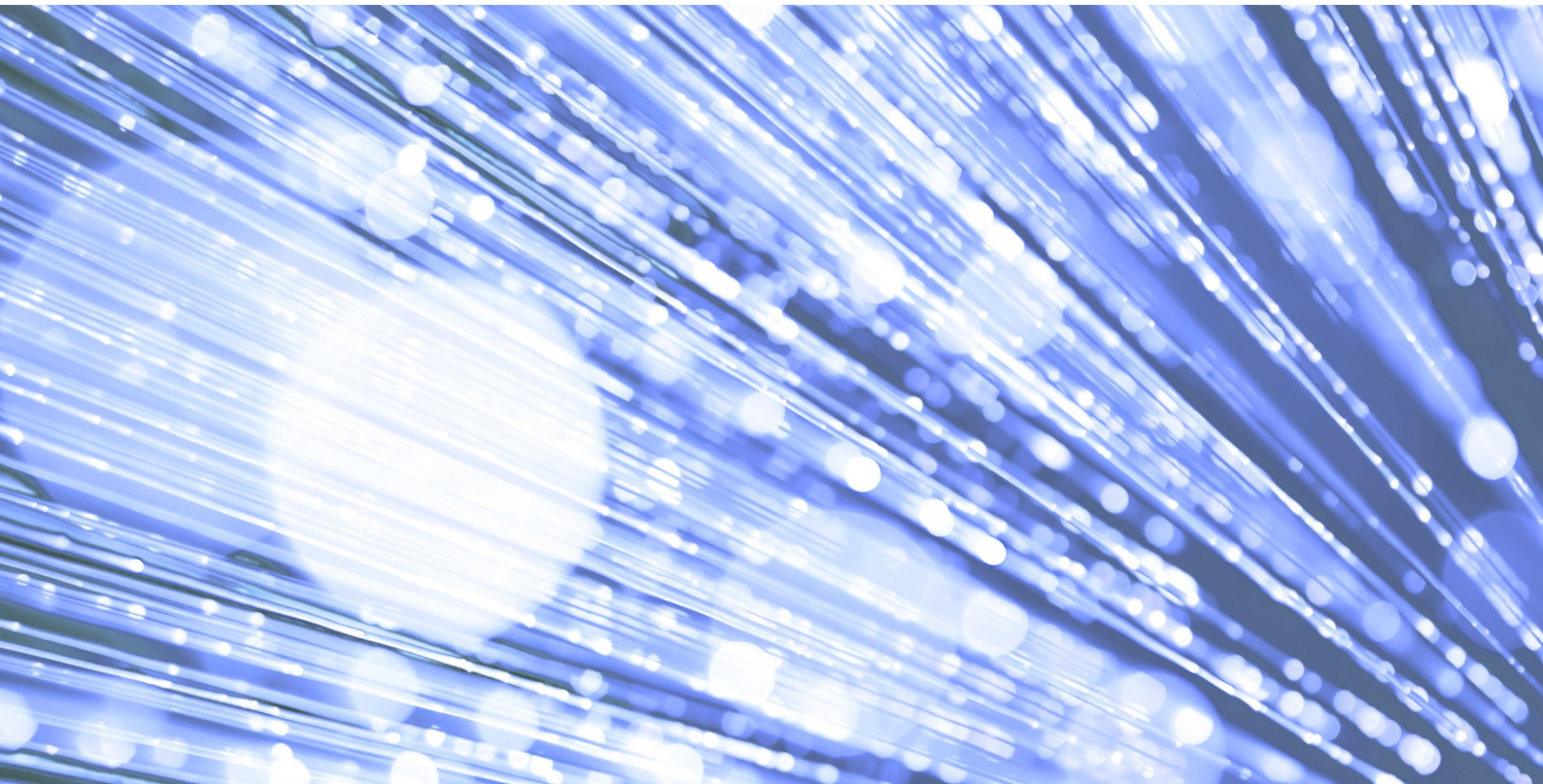


Health and Social Care Organisation Reference Data (DCB0090): Change Specification

Published 08 March 2018



Information and technology
for better health and care

Data Coordination Board

This information standard (DCB0090) has been approved for publication by the Department of Health and Social Care under [section 250 of the Health and Social Care Act 2012](#).

Assurance that this information standard meets the requirements of the Act and is appropriate for the use specified in the specification document has been provided by the Data Coordination Board (DCB), a sub-group of the Digital Delivery Board.

This information standard comprises the following documents:

- Requirement Specification
- Implementation Plan and Guidance
- Change Specification.

An Information Standards Notice (DCB0090 Amd 81/2017) has been issued as a notification of use and implementation timescales. Please read this alongside the documents for the standard.

The controlled versions of these documents can be found on the [NHS Digital website](#). Any copies held outside of that area, in whatever format (e.g. paper, email attachment), are considered to have passed out of control and should be checked for currency and validity.

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Glossary of Terms

Term / Abbreviation	What it stands for
API	Application Programming Interface. A way of communicating with a particular computer program or internet service.
Assigning Authority	The organisation responsible for maintaining a range of identifiers.
Cardinality	The number of occurrences of a given object or data item at each end of an association or relationship
Component	In XML terms this is a structural element of the document hierarchy.
CSV	Comma Separated Values. A common, relatively simple file format for storing tabular data in plain-text form, particularly well-suited to fixed length records.
Data Item Catalogue	A detailed technical description of all data items contained within the Object model which supports Organisation Reference Data.
DCB	Data Co-ordination Board. The DCB meets monthly to review and approve the assurance of information standards and data collections (including extractions), known collectively as ISCE: http://content.digital.nhs.uk/isce/dcb
Entity	An organisation, site or location which physically exists in the real world.
HSCIC	Health and Social Care Information Centre - a data, information and technology resource for the health and care system which plays a fundamental role in driving better care, better services and better outcomes for patients in England. Operates under the trading name of NHS Digital
HSCOrg	The name for the record class in the data model of a Health and Social Care Organisation.
HSCSite	The name for the record class in the data model of a Health and Social Care Organisation Site.
Intelligence	The ability for a consumer to interpret the Primary Role of a given organisation from the format of the organisation code.
Issuing Authority	The organisation responsible for publishing Health and Social Care Organisation Reference Data – currently the Organisation Data Service (ODS).
Meta Data	'Data about data' - in this context additional information about an organisation or site entity (i.e. indicating its Roles, Relationships, etc).
Multiple-frame Identifier Structure	(See also 'Unified Identifier Structure') Historically, multiple structures have been used for Organisation Reference Data identifiers to denote organisation types (referred to as 'code-frames'). For example NHS Trust codes are 3 characters long and begin with an 'R'. Code frames also convey organisation-to-site relationships

NHS Digital	The trading name for HSCIC
ODS	Organisation Data Service ¹ – part of NHS Digital responsible for the publication of organisation and practitioner codes, and for the national policy and standards with regard to the majority of organisation codes. These code standards form part of the NHS data standards. This service was previously known as National Administrative Codes Service (NACS).
Partial	Partial in the context of this document is used to describe releases restricted to changed records, designed to allow updates only to be applied to reference data, avoiding the need to refresh the entire data set.
Record	The representation of an entity within Organisation Reference Data.
Reference Data	Data that defines the set of permissible values to be used by other data fields.
Referential Integrity	Referential integrity is a database concept that ensures that relationships between tables remain consistent. When one table has a foreign key ² to another table, the concept of referential integrity states that you may not add a record to the table that contains the foreign key unless there is a corresponding record in the linked table.
SCCI	Standardisation Committee for Care - superseded by Data Coordination Board. Ceased to exist as of end March 2017.
Subject	The current record within Organisation Reference Data.
Target	Identifies the records to which relationships on the current record point.
Unified Identifier Structure	(See also 'Multiple-frame Identifier Structure') Unique identifiers, with a single, unified standard structure of 5 alternating alphabetic and numeric characters (ANANA) <i>with no inherent meaning</i> .
UPRN	Unique Property Reference Number - a unique identifier for spatial addresses in Great Britain provided in AddressBase (an Ordnance Survey product).
URI	Uniform Resource Identifier (URI). A string of characters used to identify the name of a resource. Such identification enables interaction with representations of the resource over a network, typically the World Wide Web. The most common form of URI is the Uniform Resource Locator (URL), frequently referred to informally as a web address.
URL	Uniform Resource Locator - a reference (an address) to a resource on the Internet. For example a URL could be the name of a file on the World Wide Web because most URLs refer to a file on some machine on the network such as an XML Schema. However, URLs also can point to other resources on the network, such as database queries and command output.

¹ <https://digital.nhs.uk/organisation-data-service>

² <http://databases.about.com/cs/specificproducts/g/foreignkey.htm>

XML	Extensible Markup Language. A set of rules for encoding documents in machine-readable form.
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1 About this Document

1.1 Scope of Document

This paper details a series of changes being made to legacy Organisation Reference Data products to address a series of known issues with the current approach.

It details the changes, why they are being made and what benefits they will bring, the timeline for transition, who the affected stakeholders are and what requirements are placed on them, and examines the associated impacts. This paper should be read by existing users who have already implemented the data prior to February 2017, along with the accompanying Implementation Guidance and relevant technical supporting documents as well as the management summary and business justification documents, which describe the drivers for the change in more detail.

This paper was updated in January 2018 to introduce a new delivery mechanism for weekly/daily updates to Health and Social Care Organisation Reference Data. The information standards notice (0090), when originally published, forecasted that by February 2018 users would be able to access partial amendment XML files (containing updated records) via Technology Reference data Update Distribution (TRUD). However, the strategic direction of the issuing authority has changed, and in place of weekly/daily TRUD releases, an Application Programming Interface (API) will be introduced providing data consumers with direct access to updates of the data.

Relevant sections of the 0090 Health and Social Care Organisation Reference Data fundamental standard have been updated accordingly as part of this amendment release. The introduction of an API service makes no substantive difference to the organisation reference data changes, or their nature, as described by the original standard.

1.2 Associated Documents

All the published component documents of the standard are detailed below.

Note that the new state that this paper describes forms a new, baseline fundamental information standard for Health and Social Care Organisation Reference Data (DCB0090). The Requirement Specification that forms part of the standard provides users with a detailed description of the data, where and why it applies and what is required of stakeholders to comply with the standard but does not address change from the old state to the new; this should only be required by new users who are undertaking a brand new implementation of Health and Social Care Organisation Reference Data post February 2017.

Reference	Content
Management Summary_DCB0090 Amd 24-2015 v 1.0.docx	High-level overview of the change from the legacy state to the new, for existing users that must transition
Implementation Plan & Guidance_DCB0090 Amd 81-2017	Guidance on implementation of Organisation data, for both new and existing users

Requirement Specification_DCB0090 Amd 81-2017	Fundamental Standard for Health and Social Care Organisation Reference Data (for new users)
Full Business Justification_DCB0090 Amd 24-2015 v 2.0.docx	Details the drivers for the changes made to legacy products to establish the Fundamental Standard SCCI0090 (for existing users of data prior to February 2017 only)
XML Organisation Data Products Web Pages ³	Additional web resources supporting transition from legacy products to the Fundamental Standard, published on ODS pages of the NHS Digital website. Includes the Technical Specification which provides the technical information required to understand XML Organisation data products.

1.3 Document Conventions

Throughout this document, the phrase ‘Health and Social Care Organisation Reference Data’ or ‘Organisation Reference Data’ is used to refer to all in-scope data, including both Organisation *and* Organisation Site data.

Note that the name for SCCI0090 was previously ‘Organisation Data Service’ however with its establishment as a fundamental information standard this has been amended to ‘Health and Social Care Organisation Reference Data’.

³ <https://digital.nhs.uk/Organisation-data-service/XML-Organisation-Data-Products>

2 Standard Description

Amendment	
Standard Number	DCB0090
Standard Title	Health and Social Care Organisation Reference Data
Standard Description	<p>Describes reference data about the Organisations that comprise the health and social care services including non-direct-care Organisations, primarily in England but also in the other UK-constituent countries.</p> <p>The data is distributed and uploaded to health IT systems. It supports user security, access control, messaging and is used as reference data for both operations and reporting.</p>
Release Number	Amd 81/2017
Release Title	Health and Social Care Organisation Reference Data Version 1.1
Release Description	<p>Controlled organisation reference data has been widely used in the NHS for over 20 years. The information it provides on organisations is central to the day-to-day functioning of health and social care and almost universally used (although implemented in a wide variety of ways).</p> <p>The data has a number of long-standing issues. These include the imminent exhaustion of allowable code ranges, inflexibility around relationships and metadata about organisations, and an outdated approach to release file formats and publication.</p> <p>The issuing authority is making a series of changes that aim to address the known issues and increase the quality, flexibility and long-term viability of the data. This release provides notice of their implementation. They encompass:</p> <ul style="list-style-type: none"> • Unique identifiers, with a single, unified standard structure of 5 alternating alphabetic and numeric characters (ANANA) with no inherent meaning. Concepts previously indicated through identifier structure will be addressed with new meta-data; • New meta-data for Primary Role and non-Primary Role(s) (encompassing Organisation Type and Subtype concepts respectively); • New meta-data for Relationships providing context via a set of Relationship Names; • Increased release frequency and simplified structure; • Move from flat-file CSV format, to XML; • Introduction of the ODS API Suite to enable users to obtain daily updates of data if required.
Applies to:	All end-users of Organisation Reference Data. Including but not limited to: NHS Trusts, primary care & commissioning organisations, independent sector healthcare organisations, healthcare organisations in other UK-constituent countries, suppliers of systems, SUS/NTS &

	data set owners, social care, arms-length bodies, government departments & non-departmental public bodies, executive agencies, inspectorates, health and social care educational establishments, professional bodies, etc.
Implementation Dates	The beginning of the transition process was 24 February 2017 with the introduction of the new XML products which will dual run with the legacy CSV files for a period. The ODS API will go live by the end of April 2018. The new identifier structure will be introduced (for new codes only – <i>no existing codes will be replaced</i>) on 1 April 2020. Implementation ends on 26 November 2021 with the withdrawal of the existing CSV products.
Link to documentation	More information about the development of the changes can be found on the NHS Digital website: https://digital.nhs.uk/Organisation-data-service/XML-Organisation-Data-Products
Business Lead	
Name	Mike Presence
Organisation	NHS Digital
Contact details	Feedback can be provided via: exeter.helpdesk@nhs.net
Publication	
Date of publication	8 March 2018

3 Background

Comprehensive reference data about organisations for use within health and social care informatics in England has been maintained since the early 1990's by a single central service, hosted by various organisations over this period including the Department of Health, the Information Authority and NHS Connecting for Health. The responsibility currently resides with the Organisation Data Service (ODS), hosted by NHS Digital.

The data comprises:

- authoritative national lists for a wide range of organisations of interest to the NHS and social care;
- a standard set of identification codes which are unique across the data set;
- a change history record and reference data to support NHS and social care information systems;
- details of the relationships between organisations, and organisations and their sites, where appropriate.

The data is extremely widely implemented throughout Health and Social Care and embedded within pivotal business processes, systems and services. It is distributed and uploaded to IT systems including the Spine, providing information on organisations that is absolutely central to the day-to-day functioning of Health and Social Care and almost universally used (although implemented in a wide variety of ways). It supports interoperability in terms of user security, access control, system messaging and financial transactions, and is used as reference data for both IT systems operations and reporting.

Over time, many aspects of the Health and Social Care Organisation Reference Data interface have become outdated or problematic in some way which has resulted in a number of long-standing issues. This is against the backdrop of a user base which has expanded its use cases and built significant dependencies on the current data format and release mechanism. However the issues which have been identified have reached a point where action of some form is required to allow ongoing provision of organisation coding.

Consequently, the redesign of the existing interface is vital to ensure the future efficacy of Health and Social Care Organisation Reference Data, which is central to the day-to-day operation of health and social care services in England. This redesign will require systems and services that consume organisation data to make significant changes in the short term, in order to enable them to take advantage of the far-reaching benefits and efficiencies afforded by the new interface.

3.1 Origin and Evolution of 0090

The information standard DCB0090 has been in place for some years supporting a range of existing legacy data products. Although the majority of these legacy products are composed of Organisation Reference Data (and are effectively being replaced by the new approach outlined in this standard) they also encompass a range of non-Organisation data, such as codes identifying healthcare professionals for example (i.e. People, as opposed to Organisations).

Many of the legacy products originated before information standards governance was consistently applied to any of them. When DCB0090 first emerged it did not constitute a baseline; it evolved over time as an umbrella standard (named after the issuing authority ODS), under which changes or additions to *any* of the legacy products were published – both Organisation and non-Organisation.

The new Organisation Reference Data products that this change specifies were developed, in the first instance, with the subset of legacy products that identified Organisations as their basis. This was done to ensure ongoing support for core existing business needs. Similarly, the new fundamental standard for Organisation has been developed under the DCB0090 banner to provide continuity for existing users.

What this means however is that DCB0090 has effectively been reduced in scope with this change; all the legacy products that concerned non-Organisation data still exist but have been divorced from their host information standard, as they are now defined as out of scope. This is reinforced by a change of name for DCB0090 to Health and Social Care Organisation Reference Data, to reflect its narrower scope and new status as a fundamental standard.

Existing users should be aware that in its previous incarnation DCB0090 encompassed the whole of the issuing authority's output including non-Organisation data such as HCP codes. This means that a number of Information Standards Notices exist under 0090 that made changes to products that are now considered out of scope – these can be accessed in the online archives.

To address this, the issuing authority will be taking steps to establish additional new fundamental standards which will govern the various non-Organisation data products it is responsible for maintaining.

3.2 Change of Name for DCB0090

The information standard DCB0090 was originally named 'Organisation Data Service', after the issuing authority and service that currently maintains Organisation Reference Data.

As described above, this information standard has re-based the subject data and as well as introducing a new approach and a range of new products, establishes DCB0090 as a fundamental information standard for Organisation. To complement this, the opportunity has been taken to rename it 'Health and Social Care Organisation Reference Data', to be more representative of the subject data set.

3.3 Operational Context

The authority responsible for maintaining Organisation Reference Data (currently the Organisation Data Service) has no explicit, direct relationships to other policies, programmes, projects or services elsewhere within health and social care (other than with NHS Digital as the host).

This said there are many close associations with other areas due to the foundational nature of the data and the way it is used within systems and processes, and its widespread use. Further detail on the range of stakeholders is supplied in the Appendix at 10.1.

3.4 Related Standards

A very large volume of stand-alone information standards require the use of Organisation Reference Data within data sets, for example to identify commissioners, referrers, those responsible for payment, and many other use-cases. Each of these information standards will need to be updated to absorb the changes to Organisation Reference Data.

In addition, the nature of these information standards and the purpose and use of the data sets which they govern is such that there are likely to be a further volume of downstream impacts to dependent processes and systems.

Resource does not allow for the issuing authority to undertake detailed analysis of all information standards in the timescales required for their inclusion within this paper. However, in response to a recommendation from the Standardisation Committee for Care Information (SCCI, now superseded by DCB) following acceptance of the Requirement stage of this standard, steps have been taken to establish a dedicated programme of work focusing on the implementation of the changes to Organisation Reference Data. A core deliverable of this programme is to focus on the identification and assessment of impacts to related standards, estimate the costs involved and to aim to ensure any necessary changes that are identified are applied in a timely manner, by coordinating activities amongst standards owners. A key requirement of the programme will be to continuously report back to DCB following approval of the standard, so that they may consider the emerging information about the impacts to related standards as implementation progresses.

In lieu of this programme engaging, all information standards owners are encouraged to investigate and assess how their standards are affected by the changes to Organisation Reference data outlined in this paper.

3.5 Update to Original Standard Release

Following the publication of the fundamental standard, the subsequent development of an Application Programming Interface (API) for organisation data, that will give data consumers direct access to Health and Social Care Organisation Reference Data, has resulted in a re-assessment of the future strategy for releasing partial/delta XML files as defined in the original standard.

The API will deliver a direct interface to organisation reference data that complies with the fundamental standard and is made available to end users. This will provide a more up to date technical solution for the maintenance of organisation reference data within local systems, as well as a more efficient production and quality assurance process.

The approach allows the issuing authority to provide regular updates of data without exposing users to complex change mechanisms. It also allows users to baseline the data using the XML products and connect to the service to retrieve updates at the user's convenience. A 'LastChangeDate' mechanism is available to users to retrieve appropriate records which have changed.

The API provides a better alternative for provision of more frequent, partial updates to Organisation Reference Data. It is felt that the API embodies a significant number of advantages over the release of daily XML extracts, and should replace it.

- Simplified mechanism for updating record changes
- Users can connect and retrieve updates at their convenience
- Users can make the choice as to whether to store the data locally or access it on demand
- Users can baseline the data using the XML products and connect to the service to retrieve updates via the 'LastChangeDate' mechanism

The issuing authority will continue to release the XML data products monthly via TRUD.

This Change Specification and other related standard documents have been updated as part of this release to reflect this amendment.

4 Change Overview

The following section outlines what changes are being applied. More information on why the changes are needed are available within the Full Business Justification document.

4.1 Current Approach

- A multiple-frame identifier structure is used for identifiers to denote organisation type (referred to as a 'Code-Frame'). E.g. NHS Trust codes are 3 characters long and begin with an 'R', CCG codes are three characters long and have a number as the first character, and letters for the second and third. There are over 80 distinct code frames currently;
- Code Frames also convey organisation-to-site relationships (i.e. a site identifier shares the parent organisation's identifier as a prefix);
- Codes for most key organisations have historically been limited to 3 characters in length;
- Flat-structure Comma Separated Value files are used to release data, with file specifications that must be separately interpreted. These flat-structure release files also mean:
 - Relationships are restricted in number;
 - Additional meta-data for organisations (subtype) is limited to one per organisation;
- Very little information is supplied on Relationship context;
- Currently publication is structured around quarterly 'full' releases, supplemented with monthly and weekly releases of a subset of files only;
- The county element of addresses is a mandatory field; it is guaranteed to be supplied for all records.

4.2 Future Approach

- A unified identifier structure of 5 alternating alphabetic and numeric characters (ANANA), with no inherent meaning;
- New meta-data for Primary Role and non-Primary Roles (encompassing Organisation Type and Subtype concepts respectively);
- New meta-data for Relationships providing context via a set of Relationship Names
- Increased release availability and simplified structure
- A move from flat-file CSV format, to XML. This facilitates:
 - All supporting information required to interpret data integral to file releases
 - Capacity to publish multiple relationships for a single Organisation, with new meta-data that provides context for each one ('Relationship Name')
 - Capacity to publish multiple non-Primary Roles for a single Organisation
 - Exploits opportunities for extensibility employing recognised standards-based approaches e.g. dates, OIDs, instance identifiers
- County element of addresses is an optional; it will cease to be populated for new records in the near future

- An ODS API Suite available by the end of April 2018 which will provide users with access to daily updates of organisation reference data if required.

4.3 Significance of Identifier Structure Change

This standard comprises a large number of changes impacting a wide range of aspects of Organisation Reference Data, from the identifiers to the release structure and publication format, and down to the level of individual attributes and meta-data. However, it is important to stress the potential for the new identifier structure in particular to require a large volume of changes to information systems and business processes.

From April 2020, the structure of the codes used in Organisation Reference Data will no longer indicate the type of entity they identify. This will mean that any system functionality that requires Organisation type and currently derives it from identifier structure will have to be changed, and make use of new Organisation Role meta-data values in the XML products instead.

It is also known that many human users employ tacit knowledge of the legacy identifier structures to inform how they create, enter and process data. Taking this ability away from human users is likely to be problematic.

The other aspect of this change is the standardisation of length at 5 characters; the codes for many core commissioner and provider Organisations have been 3 characters long for many years, so it is likely that standardisation at 5 characters will require many users to increase maximum field lengths throughout database tables, user interface screens, forms, message validation, import routines, etc.

4.4 ODS API Suite

There will be no change to the release frequency or release mechanism for the current full XML products. These will continue to be published on a monthly basis via TRUD.

For users who wish to obtain more frequent updates of organisation reference data, the ODS API Suite will be available by the end of April 2018, in place of the previously forecast Partial XML Files released via TRUD on a weekly basis. The API will provide users with access to updates of organisation reference data daily if required. The ODS API Suite can be accessed via: <https://digital.nhs.uk/organisation-data-service/APIs>

The ODS API Suite includes two interfaces and the data returned is transformed to meet requirements of two customer groups. The data returned by each interface is sourced from the same underlying database which is populated from XML HSCOrgRefData managed by the Organisation Data Service (ODS) within NHS Digital. However, the data returned by the different interfaces differs as shown in the diagrams below.

Interface 1: ODS ORD API (Organisation Reference Data Information Standard)

A number of ODS consumers have invested in the ODS XML format approved via the information standards process (ref: DCB0090 Organisation Reference Data) and

require an API that utilises this so as to maximise their investment in using that format.

An interface aligned to the standard allows consumers to synchronise changes into a local data store. This API allows users to baseline organisation reference data from the XML products and then connect to the API to retrieve updates on a frequency they can define.

Figure 1 below shows the scope of data available via the ODS ORD API (i.e. all components of the Organisation Reference Data record).

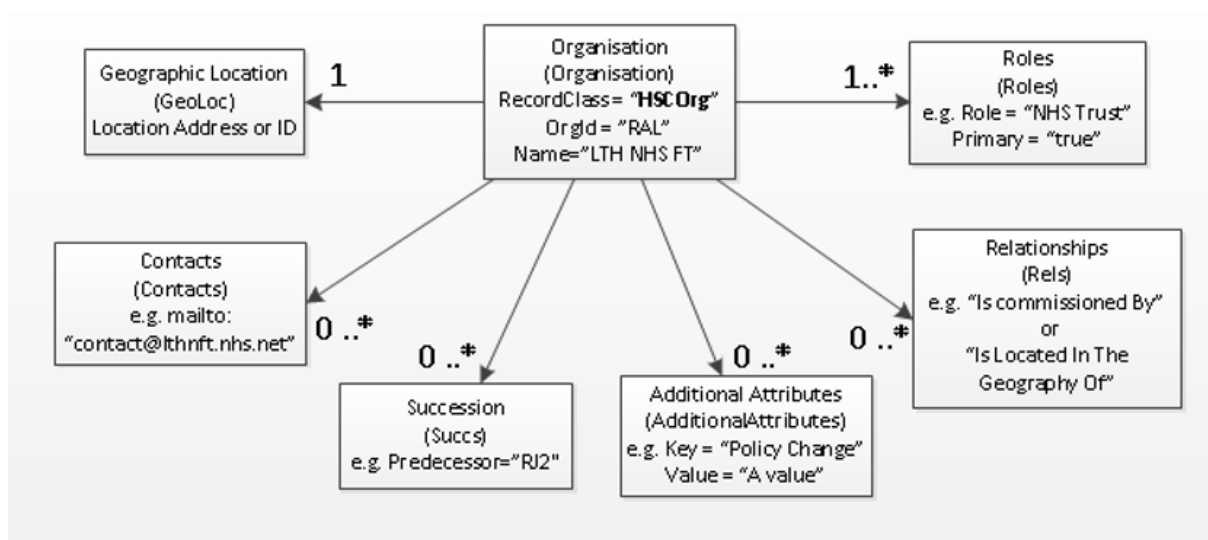


Figure 1 Scope of Organisation Reference Data record available via the ODS ORD API.

Interface 2: ODS Lookup API (FHIR)

With the increasing number of FHIR (Fast Health Interoperability Resources) based APIs there is also a need to allow ODS data to be used directly by the APIs and leverage the use of the FHIR standard. An API based on the HL7 FHIR standard "ODS Lookup API" will support transactional use cases, generally associated with clinical messaging. Please note that the data returned via this interface does **not** conform with the 0090 information standard.

FHIR is suitable for use in a wide variety of contexts – mobile phone apps, cloud communications, electronic health record based data sharing and server communications.

Figure 2 below shows the scope of data available via the ODS Lookup API. Only a subset of the record components highlighted in red will be returned by the ODS Lookup API (FHIR).

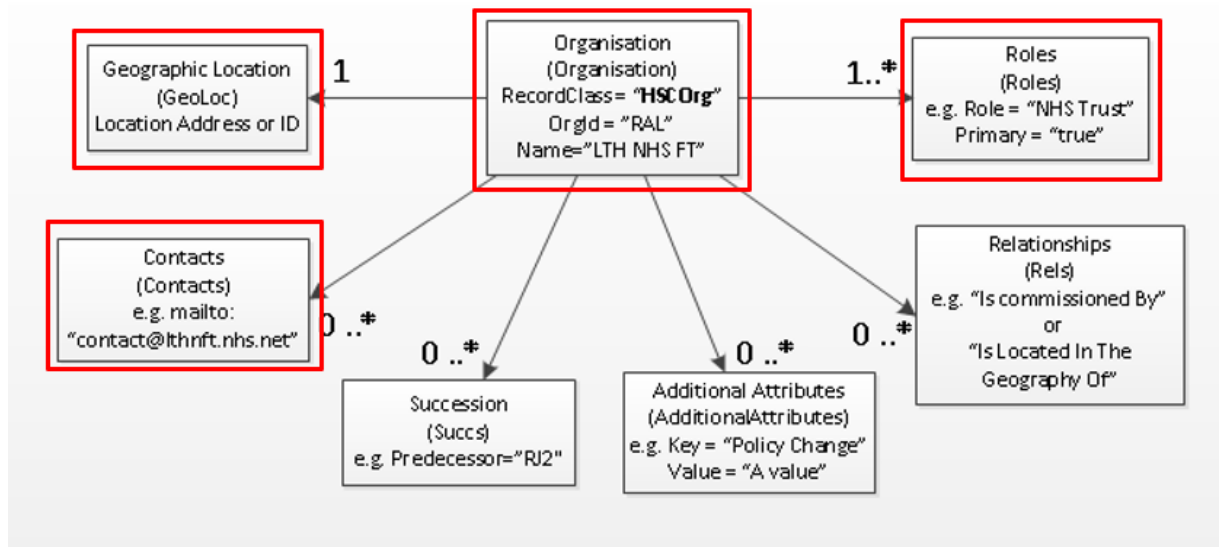


Figure 2 Scope of Organisation Reference Data record available via the ODS Lookup API (FHIR).

Further information can also be found in the XML Products Guide which is available on the issuing authority's website⁴.

4.5 Support Tools

Note that one of the advantages of releasing data in an XML format is the ease with which it may be transformed into other formats (including CSV). Simple tools and guidance to aid transformation of the XML data are provided – more information on these can be found in the Technical Specification⁵.

An overview of the ODS API Suite and the differences between interfaces is available for users at: <https://digital.nhs.uk/organisation-data-service/APIs>

In addition to the Implementation Plan and Guidance document published with the information standard, further technical user guides for both styles of API available within the ODS API Suite have been developed to support users.

The user guidance for the ODS ORD interface and the FHIR interface will be hosted at: <https://developer.nhs.uk/>

⁴ <https://digital.nhs.uk/Organisation-data-service/XML-Organisation-Data-Products>

⁵ <https://digital.nhs.uk/Organisation-data-service/XML-Organisation-Data-Products>

5 Implementation Approach

5.1 When Are We Changing?

The initial implementation start date for this standard of 24 February 2017 marked the point at which the XML was formally considered an approved information standard. The first complete release for live use was published on this date.

The diagram below shows this and four further key milestones in the transition to the new interface, highlighting the staggered approach.

It should be noted that whilst these key milestones are natural points to focus on and organise the implementation around, each one triggers or enables a number of further changes which it is not practical to signpost on the diagram. The changes are summarised in full within section 8.

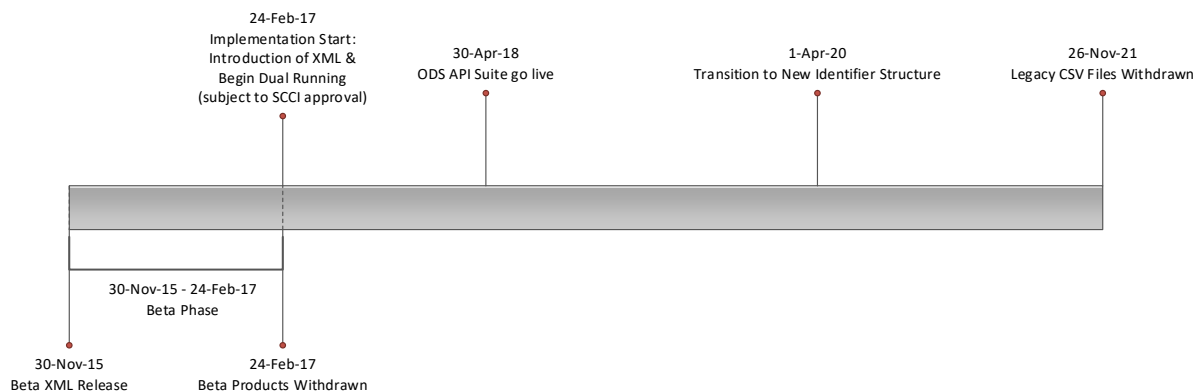


Figure 3- Implementation Milestones

5.2 XML and CSV Dual Running

The first, full version of the XML products suitable for use in live environments was released on the implementation start date for this information standard of 24 February 2017. Any data that has been available from the legacy CSV products will be included within the new suite of XML files.

Note that the legacy CSV products will *not* be withdrawn at this point; instead the two product sets will be dual run for a period of nearly 5 years until the CSV files are discontinued in November 2021.

A mixed-economy of formats used by stakeholders during dual running will not cause problems with interoperability; all users will still be accessing the same data – only the processes required to import the data will need to change. Once imported into a system or any other form in which the data is used to interoperate between stakeholders there should be no differences.

Note: simple tools and guidance to aid transformation of the XML data will be provided – more information on these can be found in the Technical Specification.

Note that one of the advantages of releasing data in an XML format is the ease with which it may be transformed into other formats (including CSV). Simple tools and

guidance to aid transformation of the XML data will be provided – more information on these can be found in the Technical Specification.

5.3 Identifier Structure Transition

As outlined in the Business Justification, the Transition to the new identifier structure is being delayed for as long as possible, to allow existing users time to transition.

The new structure will start being allocated to new records from 1 April 2020. This date is based on analysis of the remaining viable codes in the existing multiple-frame identifiers, and the historic rate of usage, to define the longest delay possible before the risk of code exhaustion becomes too great.

Note however that this is not a dual-running approach

The new unified identifier structure will only be applied to new records created on or after 1 April 2020. From 1 April 2020:

- All new codes will use ANANA
- All existing codes will remain the same

No legacy identifiers will be re-coded at any point.

There is therefore no requirement to replace existing codes and no mapping exercise is required – existing codes will simply persist indefinitely until naturally closed.

Nevertheless, from 1 April 2020 **all** identifiers should be treated the same (i.e. it should be assumed that their structure does not imply any meaning).

6 Impacts

This section provides some high-level broad impacts for overall context.

It should be noted that the reality is likely to be significantly more complex. Organisations will host a multitude of systems and processes that use Organisation Reference Data, each likely to be affected by different impacts in subtly different combinations and with differing interdependencies.

Neither can the following be considered exhaustive; many specialty or departmental-specific systems and processes are bound to be affected that are not listed here. This section is intended to provide some useful indications of the sorts of dependencies and areas of impact, as a prompt only.

6.1 Who Should Act?

It is known that Organisation Reference Data is ubiquitously used throughout the health and social care system, and yet the data is publically available so it is difficult to exhaustively know all the uses or implementations of it.

This said, the issuing authority has made considerable efforts in the past to identify and engage with stakeholders in as comprehensive a way as possible, and continues to make efforts to improve understanding of the extent and nature of its user base. A listing of known users is provided to readers of this document for indicative purposes within the Appendix, including some explanation of how it has been sourced and a description of some of the issues faced in creating and maintaining such a listing.

Whilst the list provided in the appendix provides a good background to the context of the user-base for Organisation Reference Data, and indeed is of critical importance to the maintenance of the service for things like communications and strategic planning, there will always be a risk that such a list is not 100% complete at a given moment in time. Indeed, the Issuing Authority itself does not currently attempt to maintain a 'live' list of any form and, although steps are being taken to undertake a new programme of work to establish something of this nature (see section 6.2), in lieu of this the static list supplied in this document should be used with caution. For the purposes of this document and defining the scope of impact, it is appropriate to apply the following high-level statement:

This change is likely to directly impact any individual, organisation or other body engaged in supplying, contracting to, or otherwise interacting with health and social care, that makes use of Health and Social Care Organisation Reference Data either currently or in the future.

All such stakeholders should thoroughly assess all of their systems and business processes to identify any dependencies on Health and Social Care Organisation Reference Data. Usage of the data is extremely wide-ranging and although not *all* dependencies will translate into impacts, any and all that *are* identified should be investigated in detail. Section 6.3 provides examples of the key, common impacts that stakeholders will be subject to.

6.2 Implementation Programme

Significant communications and engagement work has been undertaken by the issuing authority during development of the information standard, and a large volume of information to this effect has already been gathered. However, the user base for Organisation Data is vast, as is the volume and variety of types of implementation. This makes it extremely difficult to gain the critical mass of information and level of detail that are required to establish confidence that the changes can be absorbed by stakeholders without unacceptable impacts. It was the view of the issuing authority and the Standardisation Committee for Care Information that the degree of insight required could only be achieved through the sustained efforts of a dedicated, funded and directly resourced programme of work, over a significant period of time.

Accordingly, steps were taken to establish a programme of work with dedicated funding and resources to oversee transition in the wider service.

The programme is in the process of gathering comprehensive information directly from stakeholders about the volume and nature of the impacts the changes will have, and the costs of mitigation, and subsequently ensure the safe implementation of the changes throughout the NHS and social care.

One of the main focuses of the programme is to undertake extensive stakeholder identification and analysis work, going on to engage with those stakeholders and to drive engagement with the process and changes.

Further detail is provided in the Implementation Plan and Guidance.

6.3 Impact Examples

Change Description	Impact Description	Suggested Mitigation
Increase identifier length to 5 characters	Field length restrictions may mean systems cannot accept codes, and that screens and/or physical printed media are unable to display them. Note: some stakeholders may also wish to display two codes in the case of representing Organisation Sites (i.e. one code for the parent Organisation, and one for the Site)	Redevelop systems, screens & printed media to accommodate longer and/or multiple codes
Remove multiple-frame identifier structures that identify Organisation Type, introduce uniform structure of alternating alpha-number (ANANA) does not convey any meaning	Systems will no longer be able to parse organisation code structure to derive Organisation Type	Use Primary Role meta-data to derive the nature of an Organisation
	Systems will no longer be able to parse organisation code structure to derive the parent organisation of a site	Use 'Is Operated By' Named Relationship meta-data to derive the organisation responsible for operating services at a site
	Identifiers will become more difficult to memorise and manually input	Organisations should move away from manual processes wherever possible, plus lookup tools and tables should be provided where needed
	It will be impossible for human users to determine Organisation Type from the structure of a code.	Redevelop systems, screens & printed media to accommodate Primary Role name
Move relationship information from a static field, to dynamic meta-data	Systems will no longer be able to rely on a particular type of relationship being supplied in a single static field in the organisation record (e.g. field 15=commissioner)	Use Relationship meta data

Change Description	Impact Description	Suggested Mitigation
Increase relationship publication capacity	Systems will no longer be able to assume that a single provided relationship is the current or latest for the given organisation, or of a particular context	Use Relationship Name and start and end dates to select the most appropriate relationship
Move subtype information from a static field, to dynamic meta-data	Systems will no longer be able to rely on a particular subtype being supplied in a single static field in the organisation record (for example field 26=practice type, e.g. 1: Walk In Centre, 2: Out of Hours, 5: Prison, etc.)	Use Non-Primary Role meta data
Increase non-Primary Role (i.e. subtype) publication capacity	Systems will no longer be able to assume that a single provided subtype is the most current or appropriate (as multiple may be provided)	Use Non-Primary Role name and start and end dates to select the most appropriate Non-Primary Role
Introduce quarterly XML releases	More flexible, richer data available, but will only be available in XML	Redesign to handle XML
XML releases increase in frequency to monthly	More frequent updates available, but only in XML via TRUD ⁶	Redesign to handle monthly files (NB: this is dependent on having already transitioned to XML)
Data updates more frequently than monthly (if required) in JSON or XML format via the ODS API (data store refreshed daily)	More frequent updates available (by the end of April 2018), in JSON or XML via the ODS API Suite	Redesign to handle daily updates via API if desired (NB: this is dependent on having already transitioned to XML). Note: The API is configured to limit results in order to ensure that the service performance meets the needs of all stakeholders. For this reason it is impossible to build a baseline of all organisation reference data directly from the

⁶ <https://isd.digital.nhs.uk/trud3/user/guest/group/0/home>

Change Description	Impact Description	Suggested Mitigation
		API (stakeholders must baseline using the XML products first).
CSV products deprecated in 2021	Systems reliant on CSV format files for organisation data updates will no longer be able to obtain organisation data	Redesign to handle XML and/or make use of tooling provided to convert XML into preferred format
Single new XML archive file; all records flow in the main organisation data with periodic, forecasted archiving to an XML archive product when required to streamline live files	Historic data will no longer be available from earchive file	Redevelop to interrogate close dates in the main XML release file and/or the new standalone archive XML product

Table 1 – Impact Examples

7 Scope of Change

This section aims to define which elements of the existing data set will be affected by the changes and which will not. However, this is complicated because there is a lot of variation in the way the changes will manifest themselves:

- The identifier structure will not change for all records; data that is not maintained by the issuing authority but instead supplied by a third party will retain existing identifier structures (see section 7.1);
- Whilst the majority of Organisation Types will transform to an equivalent new Organisation Role, with the same (or at least very similar) name, some will amalgamate with others or be re-named (see section 7.2);
- Some legacy subtypes will be promoted to Primary Roles, whilst some Organisation Types may be demoted to non-Primary Roles (see sections 7.2 and 7.7);
- The numerous unique CSV products will not be replaced like for like with equivalent XML products. All HSCOrg and HSCSite data will be released across two large files (one for live records and one for archive) (see sections 7.3 and 7.5);
- CSV products will not be withdrawn if they publish data that does not primarily identify Organisations; although many will be affected because they reference *identifiers* that will transition to the new structure (see sections 7.6, 7.7, and 7.8). Note also that new information standards may be developed in the future to baseline these products, where required (see section 3.1);
- Legacy supporting products exist which are not CSV reference files. These may be redeveloped to incorporate the new identifier structures or withdrawn (see section 7.9). Note also that new information standards may be developed in the future to baseline these products, where required (see section 3.1).

In light of the above, various aspects of the scope of the changes have been described in more detail below. This information must be considered as a whole – it is not possible to provide a simple list of in-scope vs out of-scope items.

7.1 Retained Identifier Structures

The table below summarises each of the third-party data sets for which the existing identifier structures will be retained, including the Primary Roles and the existing CSV files within which they are published (note this includes not just the primary release file but also any file which references them too).

Note that the exclusion from adoption of the new identifier structure does *not* exclude these data sets from publication in the new XML format.

Supplier	Primary Role (Organisation Type)	Current & Related CSV Files	File Content
NHS Business Services Authority	Prescribing Cost Centre (GP Practice) – England, Wales & Channel Islands	Epraccur	Current Prescribing Cost Centres (GP Practices ⁷)
		Egpam	Monthly changes to Prescribing Cost Centres and GP Practitioners
		Egpaq	Quarterly changes to Prescribing Cost Centres and GP Practitioners
		Egpcur	Current GP Practitioners
		Epracmem	Prescribing Cost Centre Membership (mapping GP Practitioners to Prescribing Cost Centres)
		Epcm	Prescribing Cost Centres making up each Primary Care Organisation
		Egparc	Archived GP Practitioners
		Epracarc	Archived Prescribing Cost Centres
		Enurse	Nurse Prescribers
	Dispensaries	Edispensary	Dispensaries
		Edispensaryam	Monthly changes to Dispensaries
		Edispensaryaq	Quarterly changes to Dispensaries
	Dental Practices	Egdp	General Dental Practitioners
		Egdpm	Monthly changes to General Dental Practitioners
		Egdpaq	Quarterly Changes to General Dental Practitioners
		Egdpprac	General Dental Practices
		Egdppracam	Monthly changes to General Dental Practices
		Egdppracaq	Quarterly changes to General Dental Practices

⁷ Note that Prescribing Cost Centres were previously referred to as GP Practices

Supplier	Primary Role (Organisation Type)	Current & Related CSV Files	File Content
		Egdppracmem	General Dental Practitioner's membership of General Dental Practices
Scotland	Scottish GP Practices	Scotprac	GP Practices in Scotland
		Scotgp	GPs in Scotland
		Scotmem	Scottish practice membership (mapping GPs to practices)
	Scottish Organisations	Scotorg	Purchaser and Provider organisations in Scotland
			Scottish Health Boards (old format)
			Scottish Health Boards (new format)
			Scottish Other Providers
Northern Ireland	Northern Ireland GP Practices	Npracur	GP Practices in Northern Ireland
		Nlhscgpr	Northern Ireland GP Practices making up each LHSCG
		Ngpcur	GPs in Northern Ireland Mapped to GP Practices
	Northern Ireland Organisations	Niorg	Boards, Trusts and Local Health & Social Care Groups
		Niarchive	Northern Ireland Archive
Department for Education and Skills	Schools in England	Echool	'Edubase' Identifiers for Schools in England

Table 2: Organisation data out of scope for identifier structure change

7.2 Transformed Roles

7.2.1 GP Practice – Prescribing Cost Centre

The records published in the legacy file named epracur.csv are maintained by a third party, the NHS Prescription Services, of the NHS Business Services Authority (BSA). It has become apparent that describing them as simply 'GP Practices' is misleading and they are more accurately described as cost centre codes that identify settings where prescribing takes place. Included within this scope are a number of settings that are not, in fact GP Practices e.g. walk-in centres, prisons, out of hours services etc.

To reflect this, all the records from the legacy epracur.csv file have been assigned a Primary Role of 'Prescribing Cost Centre' – *not* GP Practice. To supplement this, one

of a range of non-Primary Roles is assigned which identify the nature of each cost centre, i.e. whether it is a GP Practice or something different.

7.2.2 Dispensaries

The legacy edispensary.csv file is described as containing identifiers for dispensaries however three subtypes are applied to identify each record as either a Pharmacy, Appliance Contractor or Oxygen Concentrator Supplier.

When published in the XML each of these subtypes will be promoted to a Primary Role, so each value is a mutually independent category of Organisation in its own right, as opposed to different manifestations of a dispensary.

Note that the Oxygen Concentrator Supplier subtype was only ever applied to three entities and all are now closed. Accordingly, the Primary Role value will be closed from the point of its introduction and the three records it is applied to will be published in the archive products.

7.2.3 Justice Organisations

The legacy ejustice.csv file applies a range of 9 subtype values to a large number of records to distinguish their nature, e.g. Constabulary, Court, Prison, etc.

When published in the XML each of these subtypes will be promoted to a Primary Role, so each value is a mutually independent category of Organisation in its own right, as opposed to different manifestations of a 'justice organisation'.

7.3 CSV to Primary Role Mapping

The legacy releases are in large part composed of a considerable number of individual CSV files, the contents of which are constrained to a single type (or a small grouping of types) of Organisation, Organisation Site or Health Care Professional.

The contents of all legacy CSV files that contain HSCOrg and HSCSite information will be published in one of two new XML release products; either the live file or, if closed within the current archiving window, the separate archive file. There will be no equivalent XML files with content constrained to individual Primary Roles.

Should a specific subset of Organisation records be required this must be extracted or isolated from the XML products by the user. Note that the issuing authority plans to make available some supporting tools that will make performing this task easier; see [section 4.4](#) for more detail.

The Interactive Object Model product, which will be provided as a supporting part of each ongoing XML release, contains a 'CSV to XML Mapping'. This diagram lists each of the legacy CSV files that contains HSCOrg or HSCSite information and maps them to the Primary Roles for the records they contain. This allows records from any legacy files to be identified within the XML, using Primary Role meta-data. Every CSV file listed in this diagram will be withdrawn at implementation end (note that this *excludes* CSV products that are *not* the primary release vehicles for HSCOrg or HSCSite records – these products will persist until further notice. See sections 7.8 and 7.9 for detail).

7.4 Successor Files

Two legacy CSV files exist purely to map succession from old to new Organisations independently of each of their primary release files (succ.csv for Organisations of current interest, and succarc.csv for closed Organisations). The equivalent is available in the new XML release products using succession elements and attributes; either the live file or, if the succession concerns Organisations both closed within the current archiving window, the separate archive file. There will be no equivalent XML files with content constrained to succession information.

Should a successor file be required it must be extracted or isolated from the XML products by the user. Note that the issuing authority plans to make available some supporting tools that will make performing this task easier; see [section 4.4](#) for more detail.

See the Technical Specification document for full detail on how Organisational succession is represented in the XML.

The existing legacy CSV products will be withdrawn in 2021. These files include:

- succ.csv – Organisational succession;
- succarc.csv – Organisational succession for historic data (i.e. closed records)

7.5 Archive Files

Three legacy CSV files contain historic data (i.e. closed records), each constrained to one, or a pre-defined a grouping of Organisation Types. The equivalent is available in one new XML archive file covering *all* Primary Roles; there will be no XML archive files with content constrained to specific Primary Roles.

Should archive data constrained to a particular type of Organisation be required it must be isolated from the XML archive product by the user. Note that the issuing authority plans to make available some supporting tools that will make performing this task easier; see [section 4.4](#) for more detail.

It should be noted that, whilst the records supplied in the new archive product will correlate with the current files, the rules for archiving records based on their status and date of closure are different for the XML product than the CSV equivalents; in other words some records that are in the CSV archive files may still be in the live file for the XML. See the Technical Specification⁸ document for full detail on the business rules that manage the archiving of records in the XML.

The existing legacy CSV products will be withdrawn in 2021. These files include:

- earchive.csv – archived Organisations;
- epracarc.csv – archived GP Practices;
- niarchive.csv – archived Northern Ireland organisations

⁸ <https://digital.nhs.uk/Organisation-data-service/XML-Organisation-Data-Products>

7.6 Mapping Files

Two legacy CSV files exist purely to map together HSCOrg and/or HSCSite entities independently of each of their primary release files. The equivalent is available in the two new XML release products using relationship elements and attributes; either the live file or, if the mapping concerns Organisations that have both been closed within the current archiving window, the separate archive file. There will be no XML files with content constrained to Organisation-to-Organisation mapping information.

Should a mapping file be required it must be isolated from the XML products by the user. Note that the issuing authority plans to make available some supporting tools that will make performing this task easier; see [section 4.4](#) for more detail.

See the Technical Specification document for full detail on how Organisation Relationships are represented in the XML.

The existing legacy CSV products will be withdrawn in 2021. These files include:

- epcmem - links English GP Practices to Primary Care Organisation;
- nlhscgpr – links Northern Ireland GP Practices to Primary Care Organisation

Note that other mapping files exist where one side of each pairing is *not* an HSCOrg or HSCSite record, but concerns Healthcare Professionals (i.e. people) and so is out of scope; the equivalent information cannot be entirely gleaned from the XML alone and so the product will persist. See section 7.8.

7.7 Reference Files

Two legacy CSV files exist purely to provide meta-data that applies to HSCOrg and HSCSite records independently of each of their primary release files. The information required to isolate these records is available in the two new XML release products using embedded meta-data; either the live file or, if the concerning Organisations that have been closed within the current archiving window, the separate archive file. There will be no XML files with content constrained to meta-data values.

Should a file with content constrained by meta-data be required, it must be isolated from the XML products by the user. Note that the issuing authority plans to make available some supporting tools that will make performing this task easier; see [section 4.4](#) for more detail.

See the Technical Specification document for full detail on how non-Primary Role identifiers, names and definitions are represented in the XML.

The existing legacy CSV products will be withdrawn in 2021. These files include:

- educationtype.csv – subtype values for schools supplied in a separate extract by the data supplier Edubase (Department for Education). Incorporated as non-Primary Roles in the XML;
- ehospice.csv – HSCOrg records with Primary Roles of NHS Trust and Non-NHS Organisation, with a subtype of 'Hospice'. Incorporated as a non-Primary Role in the XML

7.8 Non-Organisation Reference Data

7.8.1 Healthcare Professional Data

The issuing authority publishes various codes that identify people (i.e. healthcare professionals). As these records are not of class HSCOrg or HSCSite they are out of scope for this change; the identifiers will not transition to the new unified identifier structure, and the data will not be released in the new XML products. These files will continue to be maintained until further notice.

Users should note however that some of these files do reference HSCOrg entities and therefore make use of their identifiers (i.e. to indicate place of employment) in one or more fields. As such these fields may be impacted, i.e. they may need to have their maximum length and/or allowed range expanded or otherwise changed, to allow them to contain an identifier with the new unified structure.

The files that will continue to be maintained and published are listed in the below table, including details of any fields that may be affected by the new identifier structure, if any.

Filename	File Contents	Affected Field	Field Contents
Egpcur.csv	GPs	24	Primary Care Organisation
Egparc.csv	Archived GPs	None	
Eabeydisgp.csv	Abeyance and Dispersal GPs	None	
Enurse.csv	Nurse Prescribers	2	Parent Organisation
		17	Primary Care Organisation
Epcdp.csv	Private Controlled Drug Prescribers	15	Primary Care Organisation
Egdp.csv	General Dental Practitioners	None	
Econcur.csv	Hospital Consultants in England	8	Location Organisation Code
Edconcur.csv	Dental Consultants in England	8	Location Organisation Code
Wconcur.csv	Hospital Consultants in Wales	7	Location Organisation Code
Epracmem.csv	GP to Practice Membership	None	
Egdppracmem.csv	Dentist to Practice membership	None	

Table 3 – Files containing Healthcare Professional data

7.8.2 Default Codes

The issuing authority maintains a set of 'default' codes, published within a product called default.csv. These codes are for use within messages, reports and returns wherever a value is required but a valid code is not known or not available for some reason. They act as proxies for Organisation and Healthcare Professional identifiers.

This file, and all the existing codes it contains, will persist however if required new default codes may be issued within the new unified identifier structure. Any new default codes or other changes to the default.csv file required will be notified to users in a separate standards notice.

7.9 Mapping Products and Tools

The issuing authority maintains or commissions a number of additional tools, products and services that are not straightforward files to publish reference data, and which will continue to be released in their current form. These are detailed below.

Note that, as with some of the Healthcare Professional files, some of these products do reference HSCOrg and HSCSite entities and so although their existing structure and release format can remain, some field lengths and/or content restrictions may be subject to changes in order to incorporate the new unified identifier structure.

7.9.1 NHS Postcode Directory

The issuing authority commissions and releases a product from the Office for National Statistics (ONS) called the NHS Postcode Directory (NHSPD)⁹. This product maps postcodes to a range of statistical geographies, plus a number of NHS Organisations using the HSCOrg identifier.

The directory will retain its current structure and release format although a number of fields will have to incorporate the new unified structure identifiers when they are introduced, and so their specification will change to accommodate this.

7.9.2 Portal

The issuing authority provides a series of online search facilities referred to as the Portal¹⁰. It allows access to Organisation and Healthcare Professional details on various search terms such as the identifier, address or postcode.

The portal and its existing functionality will remain however it will begin to return records with the new unified identifier structure following their introduction.

7.9.3 Access Database

The issuing authority maintains a pre-populated Access Database product that supplies a subset of Organisation Reference Data contained in a data base populated with a number of predesigned queries.

⁹ <http://systems.digital.nhs.uk/data/ods/datadownloads/onsdata>

¹⁰ <http://odsportal.digital.nhs.uk/>

Although still available via the issuing authority, this product is considered to be outdated and will not be redeveloped to include the new concepts introduced in the new interface. It will instead be discontinued at an appropriate point, to be advised to users separately.

An exact date is not available at this stage but communications warning users of its pending withdrawal have been issued. When the withdrawal does take place, sufficient notice and the necessary communications will be provided, although it is recommended that users take steps to migrate off of any dependency on this product at the earliest opportunity.

Communications regarding the withdrawal of the product will be generated by the issuing authority through the usual channels using their newsletters, ad-hoc emails and items at the regular user group meeting. Providing the stakeholder is compliant with Requirement 15 (see section 9) they will receive notification.

7.10 Accessibility

The processes by which Health and Social Care Organisation Reference Data is obtained will change as follows:

- The Technology Reference-data Update Distribution service (TRUD) is an NHS Digital-owned online service which facilitates the publication of data from various services¹¹. The XML data and XML Supporting Products are available via separate packs within TRUD.
- The issuing authority's web pages contain the XML supporting products which are available to the public¹². Links to TRUD are provided as the XML data files are not published via these webpages.
- The ODS Application Programming Interface (API) Suite which allows consumers of the XML data to obtain updates to records¹³.

Users should however note that this area is particularly prone to change and future developments will almost certainly affect the methods by which the data is made available. Further updates will be made to this standard to reflect this when appropriate. Full detail on the release file names and content is supplied in the Technical Specification document.

¹¹ Further information on TRUD plus the appropriate application forms to gain access can be found on the TRUD Welcome Page at <https://isd.digital.nhs.uk/trud3/user/guest/group/0/home>

¹² <https://digital.nhs.uk/organisation-data-service>

¹³ <https://digital.nhs.uk/organisation-data-service/APIs>

8 Change Schedule

The table below provides more context and background for each of the changes, in chronological order, grouped by the 4 key milestones.

Full technical details for all of the new states are supplied in the accompanying Technical Specification document.

8.1 Introduction of XML

Key Milestone Change	Introduction of XML (Beginning of Dual Running)	Date	24-02-2017	Change ID	CH28
<p>This XML release is fully endorsed for use in live systems if desired. However, immediate implementation is not forced as the existing CSV products will not be withdrawn at this stage. Rather, this milestone marks the beginning of the transition process and a period of nearly five years of dual-running with the legacy CSV products.</p> <p>An earlier release of XML was published in November 2015 and will continue to be intermittently refreshed until this release displaces it. However this is for exploratory and test use only – it is officially classed as a beta release and <i>not</i> endorsed for use in live systems. The product range and data content may not be complete and all are subject to change during the beta phase. More information on the beta XML releases can be found on the Beta XML Release section of the issuing authority's web pages (http://systems.digital.nhs.uk/data/ods/interfacechanges/betaxml).</p> <p>NOTE: although a majority are already available, whilst new functionality is developed it is not possible to include some XML elements and attributes and some Organisations. Their introduction will either be staggered throughout the beta phase, or withheld until the first live release that this milestone represents. A separate 'XML Product Scope Timetable' document is published with the beta XML products, which provides detail on what is and is not included in the development scope over time, including target introduction dates if currently absent. The aim is for full scope to be reached before the first live release however if this cannot be achieved this product will continue to be released alongside the live products.</p>					
Enables:					
<i>Zero-to-Many Relationships</i>				Change ID	CH06
<p>The current use of pre-specified fields in a CSV file to hold Relationship information severely limits the number of Relationships that can be published for an entity and makes it difficult to expand or develop the existing provision.</p> <p>The increased flexibility of XML enables the release of Relationships at a zero-to-many cardinality with no restrictions on the number that can be published.</p>					
<i>Relationship Names</i>				Change ID	CH07
<p>Context for Relationships is currently published within separate supporting information (html pages or a Microsoft Word document).</p> <p>The XML incorporates meta-data values for a new component called Relationships, which includes an element called Name, which indicates the context for every Relationship.</p>					

Key Milestone Change	Introduction of XML (Beginning of Dual Running)	Date	24-02-2017	Change ID	CH28
<i>Relationship Dates</i>				Change ID	CH08
<p>Information on the start and end dates for Relationships is rarely provided at present and indeed this would be largely irrelevant anyway, as the CSV file structure only allows a single Relationship (i.e. the current) to be conveyed. The ability to publish multiple Relationships for a single Organisation however (see CH06), means it may become vital in the future to publish the dates for when a Relationship began and/or ended.</p> <p>The increased flexibility of XML enables the inclusion of date information for all Relationships.</p>					
<i>Organisation Roles</i>				Change ID	CH10
<p>Information on the remit and nature of Organisations is currently conveyed through two separate mechanisms. Organisation Type uses the structure of the Organisation's identifier or the name of the file the record is published in, whilst Subtype is conveyed through indicators held in pre-specified fields.</p> <p>The XML incorporates meta-data values for a new object called Organisation Role which provides a single mechanism for indicating Type and Subtype:</p> <ul style="list-style-type: none"> • Every organisation has a Primary Role denoting its core Type e.g. GP Practice, CCG, NHS Trust, etc. • Non-Primary Roles indicate supplementary functions e.g. 'provides Hospice or Treatment Centre services'. 					
<i>Organisation Role Definitions</i>				Change ID	CH11
<p>A definition for each Organisation Type and Subtype (i.e. descriptive text outlining what each value pertains to) is currently published within separate supporting information (html pages or a Microsoft Word document) and is not complete across the data set.</p> <p>Supporting information for the XML will include the Data item Catalogue product, which incorporates definitions for every Organisation Role.</p>					
<i>One-to-Many Organisation Roles</i>				Change ID	CH12
<p>The Subtype indicators currently used are integral to the flat-format CSV record. This means that the number that can be published for any given Organisation is restricted.</p> <p>Within the XML this meta-data is isolated from the core organisation record and so there is no inherent restriction on the number that can be published.</p>					
<i>Organisation Role Dates</i>				Change ID	CH13
<p>Information on the start and end dates for Roles is not provided at present, however the ability to publish multiple non-Primary Roles for a single Organisation (see CH12) means it is also vital to have a capability to publish dates for when a Role association begins and/or ends.</p> <p>The increased flexibility of XML enables the release of date information for all Roles.</p>					
<i>Single Standard File Specification</i>				Change ID	CH16

Key Milestone Change	Introduction of XML (Beginning of Dual Running)	Date	24-02-2017	Change ID	CH28
<p>Organisation data is currently published across a large number of individual CSV format files. In most cases the structures of these files differ from one another.</p> <p>The XML schema provides a single, standard structure within which all Organisation records will be contained.</p>					
<i>Operational View Dates</i>				Change ID	CH19
<ul style="list-style-type: none"> Two views exist within Organisation data currently: the Legal View conveyed in the files conveys authoritative dates, often defined by legislation. The Operational View in Spine reflects the operational need of systems. Data in each view can diverge. The XML includes Operational dates by default and Legal dates may also be present (although only where they differ from the Operational Dates). Legal dates must be nested within Operational dates. 					
<i>New Release Structures</i>				Change ID	CH22
<p>Data about current Organisations is currently released across a large number of CSV files that are organised by Organisation Type.</p> <p>XML data about current Organisations is provided in a single large full file.</p>					
<i>Amendments included in main release files only</i>				Change ID	CH23
<p>Currently, amended records are supplied in two ways; records are included in their main release file, plus a series of amendment-only files (deltas) are released that are split using the same approach as the main files, i.e. organised by Organisation Type to give multiple individual files.</p> <p>From this point, amended records are only be included in the main release files.</p>					
<i>New Amendment Approach</i>				Change ID	CH25
<p>Currently amended records are identified by way of a binary flag held in a field in the Organisation record (i.e. '1' means it is new or has been amended since the last version published; '0' means it is unchanged).</p> <p>From this point, amendments are conveyed through a 'LastChangeDate' giving the date and time of last change applied to each record in the live files published monthly. If amendments are required more frequently than monthly, these can be accessed via an API service.</p>					
<i>New Archive Approach</i>				Change ID	CH29

Key Milestone Change	Introduction of XML (Beginning of Dual Running)	Date	24-02-2017	Change ID	CH28
<p>At present 3 self-contained separate archive files are maintained and published for subsets of Organisation data (Earchive.csv – English Organisations, Epracarc.csv – GP Practices and Niarchive.csv – Northern Ireland organisations). In the current approach, when Organisation records are closed they remain in their main release file for two years, before then automatically moving to be released in a stand-alone archive file.</p> <p>A single new XML archive file will have closed records appended to it periodically, in order to maintain the efficiency of the live files. Archiving events will be planned and scheduled by the issuing authority based on the needs of the data set (i.e. total number of records in the live files) and so will be ad-hoc as opposed to following a pre-set schedule. Closed records continue to flow in the main organisation data until and unless each archiving event moves them to the archive file.</p>					

8.2 Increased Frequency of Release (Updated)

Change as published in original standard shown in strikethrough font and table cells shaded grey. Updated Change for this release (CH32) stated beneath.

Key Milestone Change	XML Releases Move to Weekly	Date	24-11-2017	Change ID	CH17
<p>Releases of the XML products are currently monthly. From this point they will be released weekly.</p> <p>Note that the legacy CSV products will continue as normal throughout the dual running period.</p>					
Key Milestone Change	XML Releases Move to Monthly	Date	28-07-2017	Change ID	CH32
<p>CH32 replaces original milestone CH17 (above)</p> <p>Releases of the XML products are currently quarterly. From this point they will be released monthly.</p> <p>Note that the legacy CSV products will continue as normal throughout the dual running period.</p> <p>Note: If more frequent updates to the XML data, an API service will be introduced that provides users with access to daily updates to the XML data (see CH 33).</p>					

8.3 Introduction of an ODS Application Programming Interface (API) (Updated)

Change as published in original standard shown in strikethrough font and table cells shaded grey. Updated Change for this release (CH33) stated beneath.

Key Milestone Change	Amendments in Single File for ALL Organisations	Date	23-02-2018	Change ID	CH30
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In the XML files amended records are included within the main release files (introduced 24-02-2017; see CH23). They are conveyed through a 'LastChangeDate' giving the date and time of last change, applied to each record (introduced 24-02-2017; see CH25).

From this point forward a partial XML file will be introduced, providing changes made over a specified time period, including ALL types of Organisation

Key Milestone Change	Introduction of ODS API	Date	By 30-04-18	Change ID	CH33
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CH33 replaces original milestone CH30 (above).

In the XML files amended records are included within the main release files (introduced 24-02-2017; see CH23). They are conveyed through a 'LastChangeDate' giving the date and time of last change, applied to each record.

From this point forward, the ODS API Suite will provide users with two API interfaces with organisation reference data:-

- **ODS ORD API** - An API aligned to the DCB0090 standard which allows consumers to baseline organisation reference data from the XML products and then connect to the API to retrieve updates as frequently as daily if required.
- **ODS Lookup API** - An API based on the HL7 FHIR standard which will support transactional use cases, generally associated with clinical messaging. **Note:** The data returned via this API does not conform to the standard.

8.4 Identifier Structure

Key Milestone Change	Transition to the New Identifier Structure	Date	01-04-2020	Change ID	CH02
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The current approach of indicating an Organisation's type through multiple-frame identifier structures will be discontinued as of 1 April 2020. All new identifiers allocated on this day and subsequently will have a uniform structure of 5 alternating alpha-number characters and carry no inherent meaning.

NOTE: **no legacy identifiers will be re-coded at any point.** Instead, existing identifiers will simply persist indefinitely until naturally closed. **Only new codes allocated on or after 1 April 2020 will have the new unified structure,** meaning users will not be required to replace any in-use identifiers.

Note this does *not* affect the implementation of the new unified structure codes; from the 1 April 2020 it can no longer be assumed that the structure of **any** identifier carries any meaning, and all should be treated accordingly.

Enables:

Identifier Length	Change ID	CH01
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Organisation Codes have traditionally been constrained to a maximum length of 3 characters (with a 2-character suffix extending their overall length to 5 for associated Site codes). Although this convention has been relaxed over time it is still applied for key organisations.

The new unified identifier structure will see length standardised at 5 characters for all new codes.

Key Milestone Change	Transition to the New Identifier Structure	Date	01-04-2020	Change ID	CH02
<i>Reintroduce Excluded Characters</i>				Change ID	CH03
<p>The majority of code frames currently in use exclude alphabetic characters that are aesthetically similar to numbers (B, I, O, S, U & Z).</p> <p>The new unified identifier structure will formally reinstate these characters. Note: this has always been a convention rather than a concrete business rule and a significant number of codes already exist that incorporate the excluded chars. This change simply formalises the inclusion of the characters and does not bring any significant level of risk.</p>					

8.5 CSV Files Discontinued

Key Milestone Change	Deprecation of Legacy CSV Files	Date	26-11-2021	Change ID	CH24
<p>The existing CSV files will cease to be maintained as of 26 November 2021, concluding a period of 4 years and 9 months of dual running since the initial introduction of the new XML products. This includes the self-contained separate archive files (earchive.csv, niarchive.csv and epraccarc.csv).</p>					

9 Requirements

This section defines all the requirements placed on stakeholders (as defined in section 6.1) in order for them to comply with this change.

Every effort has been made to ensure the requirements are defined in a concise, measurable and unambiguous nature such that they will facilitate stakeholders' verification, validation and tracing of work they undertake to meet them. To keep the requirements succinct full technical detail has not been included here; a complete description is supplied in the Technical Specification document as well as supporting materials for the release products. Similarly, more descriptive contextual guidance for users is provided in the Implementation Plan and Guidance document, both published as part of this standard.

Conformance criteria indicate whether a given requirement has been successfully met. Note that these have only been supplied in response to requirements that 'must' be implemented.

Note that the term 'Systems' encompasses all Information Technology systems in an Organisation.

9.1 Scoping

ID	Implementation Date	Requirement
1	From 17 August 2016 & prior to Impact Assessment	All systems owned or procured by the stakeholder that <i>import</i> Organisation Reference Data <u>MUST</u> be identified
2	From 17 August 2016 & prior to Impact Assessment	All systems owned or procured by the stakeholder that <i>export</i> Organisation Reference Data <u>MUST</u> be identified
3	From 17 August 2016 & prior to Impact Assessment	All systems owned or procured by the stakeholder that <i>generate</i> messages that contain Organisation Reference Data <u>MUST</u> be identified
4	From 17 August 2016 & prior to Impact Assessment	All systems owned or procured by the stakeholder that <i>receive</i> messages that contain Organisation Reference Data <u>MUST</u> be identified
5	From 17 August 2016 & prior to Impact Assessment	All systems owned or procured by the stakeholder that make use of Organisation Reference Data to generate <i>electronic</i> correspondence <u>MUST</u> be identified
6	From 17 August 2016 & prior to Impact Assessment	All systems owned or procured by the stakeholder that make use of Organisation Reference Data to generate <i>paper</i> correspondence <u>MUST</u> be identified

ID	Implementation Date	Requirement
	Conformance Criterion	A list is produced of all systems used within the stakeholder organisation that: <ul style="list-style-type: none"> • Import or export Organisation Reference Data • Receive or generate messages that contain Organisation Reference Data • Use Organisation Reference Data to generate electronic or paper correspondence
7	From 17 August 2016 & prior to Impact Assessment	All manual paper-based processes operated by the stakeholder that make use of Organisation Reference Data MUST be identified
	Conformance Criterion	A list is produced of all manual paper-based processes that make use of Organisation Reference Data
8	From 17 August 2016 & prior to Impact Assessment	All Data Sets developed and owned by the stakeholder that use Organisation Reference Data MUST be identified
	Conformance Criterion	A list is produced of all data sets owned by the stakeholder that make use of Organisation Reference Data. NB – the NHS Data Model and Dictionary Change Request published alongside this information standard can be used to identify all data items that are changing
9	From 17 August 2016 & prior to Impact Assessment	All staff roles employed by the stakeholder that interact with any of the systems or processes identified in Requirements 1-8 MUST be identified
	Conformance Criterion	A list is produced of all staff that directly and indirectly use Organisation Reference Data

Table 4 – Scoping Requirements

9.2 Impact Assessment

ID	Implementation Date	Requirement
10	From 17 August 2016, subsequent to scoping & prior to Implementation	All instances of field lengths restricted to less than 5 characters for fields intended to hold Organisation identifiers (i.e. acceptance vs. rejection of imported data, incoming messages and form field validation within the user interface) MUST be identified. This must be done for each of the contexts identified in conformance for requirements 1 to 8
	Conformance Criterion	A list is produced of all fields that contain Organisation identifiers and have a length of content restricted to less than 5 characters, for all systems, processes and data sets
11	From 17 August 2016, subsequent	All instances of validation (i.e. acceptance vs. rejection of imported data, incoming messages and form field validation within

ID	Implementation Date	Requirement
	to scoping & prior to Implementation	the user interface) that rely on the presence of an Organisation code with a particular format to indicate Organisation Type, MUST be identified. This must be done for each of the contexts identified in conformance for requirements 1 to 8
	Conformance Criterion	A list is produced of all instances of validation which enforces Organisation identifiers of a specific format (Organisation Type), for all systems, processes and data sets
12	From 17 August 2016, subsequent to scoping & prior to Implementation	All instances of functionality (i.e. triggering or continuing, vs.aborting a process) that rely on the presence of an Organisation code with a particular format to indicate Organisation Type, MUST be identified. This must be done for each of the contexts identified in conformance for requirements 1 to 8
	Conformance Criterion	A list is produced of all instances of functionality which depends on Organisation identifiers of a specific format (Organisation Type), for all systems, processes and data sets
13	From 17 August 2016, subsequent to scoping & prior to Implementation	All instances of Organisation Reference Data currently being received, processed, imported or otherwise used in Comma Separated Value format MUST be identified. This must be done for each of the contexts identified in conformance for requirements 1 to 8
	Conformance Criterion	A list is produced of all instances of Organisation Reference Data being used in CSV format, for all systems, processes and data sets
14	From 17 August 2016, subsequent to scoping & prior to Implementation	All human users (identified when conforming with requirement 9) who make use of one of the systems, processes or data sets that employ validation or functionality reliant on code format to indicate Organisation Type (identified in conformance for requirements 11 and 12), and who are therefore are likely to have committed a range of identifier formats and their meanings to memory and make day-to-day use of this, MUST be identified
	Conformance Criterion	A list is produced of all the roles for human users where tacit knowledge of the legacy code formats is used to identify the type of an Organisation

Table 5 – Impact Assessment Requirements

9.3 Implementation

NOTE: No *migration* of Organisation Reference Data will be necessary during any transition, as the new structure of identifier is only being issued to records created on or after 1 April 2020; records existing prior to this point will retain their existing identifier permanently. As such there are no requirements to remove and replace identifiers that are already in place in systems and processes; all requirements relate to the preparation of infrastructure to enable it to operate with the new approach.

Requirements 25 and 26 below are additional requirements to those defined in the original information standard, they relate specifically to the optional use of the ODS API Suite. None of the original requirements have been deleted.

ID	Implementation Date	Requirement
15	From 17 August 2016	<p>All stakeholders that implement Organisation Reference Data MUST be in receipt of the following communications from the issuing authority:</p> <ul style="list-style-type: none"> • newsletters from the issuing authority; • ad-hoc email notifications from the issuing authority; • minutes from every issuing authority User Group meeting
Conformance Criterion		<p>Your organisation is subscribed to: http://systems.digital.nhs.uk/data/ods/news (subscribers receive all newsletters and ad-hoc email bulletins)</p> <p>Your organisation obtains user group meeting minutes from: http://systems.digital.nhs.uk/data/ods/userrefpanel</p>
16	From 24 February 2017 & following Impact Assessment	<p>All existing and future implementations of Organisation Reference Data MUST comply with the current version of SCCI0090</p>
Conformance Criterion		<p>Any implementation of Organisation Reference Data complies fully with the information provided in the following products:</p> <ul style="list-style-type: none"> • organisation Reference Data XML products; • supporting information (Technical Specification, XML Schema, Data Item Catalogue, Interactive Object Model); • conformance criteria detailed within this document; • accompanying user guidance
17	From 24 February 2017	<p>Uses of CSV format Organisation Reference Data (identified in conformance for requirement 13) MAY be altered to use data that <i>originates</i> from the XML products</p>
18	From 24 February 2017	<p>Stakeholders MAY make use of XML Support Tools to convert XML products into different formats before implementation¹⁴</p>
19	From 24 February 2017	<p>Validation that relies on code format to derive Organisation Type (identified in conformance for requirement 11) MAY be removed, or amended such that it makes use of Primary Role meta-data instead</p>
20	From 24 February 2017	<p>Human users who make use of tacit knowledge of legacy code formats to identify Organisation Type (identified in conformance for requirement 14) MAY be provided with a method to derive the equivalent Primary Role using the appropriate meta-data sourced from the XML</p>
21	By 1 April 2020	<p>All fields intended to hold Organisation identifiers that currently have a restricted length of less than 5 characters (identified in</p>

¹⁴ See Technical Specification for details

ID	Implementation Date	Requirement
		conformance for requirement 10) MUST be altered to min1 max9 ¹⁵ NOTE: Organisation Site codes no longer incorporate the code of their operating Organisation. Should this be required there may be a requirement to hold <i>two separate codes</i> of min2 max9
Conformance Criterion		All fields intended to hold Organisation identifiers will accept 9 chars or less
22	By 1 April 2020	All validation that relies on code format to derive Organisation Type (identified in conformance for requirement 11) MUST be removed, or amended such that it makes use of Primary Role meta-data instead
Conformance Criterion		All remaining validation works as required with <i>both</i> Multiple-frame <i>and</i> Unified identifier structures
23	By 1 April 2020	All functionality that relies on code format to derive Organisation Type (identified in conformance for requirement 12) MUST be removed, or amended such that it makes use of Primary Role meta-data instead
Conformance Criterion		All remaining functionality works as required with <i>both</i> Multiple-frame <i>and</i> Unified identifier structures
24	By 26 November 2021	All existing uses of CSV format Organisation Reference Data (identified in conformance for requirement 13) MUST be altered to use data that originates from the XML products
25	From 30 April 2018	Stakeholders MAY make use of the ODS API Suite to access weekly / daily updates of Health and Social Care Organisation Reference Data
26	From 30 April 2018	The current status of the data provided via the ODS API Suite MAY be obtained using an appropriate API query
Conformance Criterion		All requirements for Organisation Reference Data is met without any use of the issuing authority's legacy CSV format files

Table 6 – Implementation Requirements

¹⁵ Although the new identifier structure is max 5 characters, some legacy codes are as long as 9 and because there is no migration from existing codes these will continue to persist in the data going forward. All systems must therefore be able to accept codes as long as 9 characters even though no more will be allocated in the future

10 Appendix

10.1 Stakeholder Identification

As outlined elsewhere in this standard, exhaustive identification of all the users and stakeholders of Health and Social Care Organisation Reference Data is extremely difficult to achieve. This is for a number of reasons:

- There is an extremely large volume of users;
- The types of users vary enormously;
- The type of implementations vary enormously;
- The data is made openly available via internet downloads.

Despite these issues, there are some methods and sources by which stakeholder organisations can be definitively identified which are listed below. Some do involve a level of assumption however these are considered acceptable, on the basis that it is safer to engage unnecessarily with organisations that are not impacted by the changes, than to fail to engage with any that are.

- TRUD (Technology Reference-data Update Distribution service) is an online service which incorporates publication of Organisation data¹⁶. Users of TRUD must register so a list of users is available - although it should be noted this does not cover all users, as there are also freely available downloads hosted on the internet;
- Presence within the data – the Organisation Reference Data itself can be used to identify users, based on the assumption that if an Organisation requires a record within the data, it is likely to make its own use of the wider dataset;
- Any organisation involved in research, regulation, planning, commissioning, funding or other strategic-level activities involving health and social care (i.e. those at the top of the perceived hierarchy) can be safely assumed to make use of the data, at a minimum within activity reporting and analysis, but potentially within their own systems, documentation, messaging etc. too;
- All informatics systems used within health and social care make use of the data, so any organisation that develops and supplies such systems will have a significant dependency upon it.

These methods have been used to compile the below list of organisations that are either known, or highly likely, to be users of Organisation Data. In many cases, to keep the table a manageable size the name of a *type* of Organisation is used as opposed to listing every instance individually. Alternatively, where an organisation is a single entity then its name has been used. In both instances the reader should bear in mind that in reality, these records represent multiple additional stakeholders – in the case of the former, the individual instances of the type of organisation (e.g. there are over 200 individual NHS Trusts). For the latter these tend to be large organisations and often they host multiple programmes/projects that should be considered distinct stakeholders in their own right (e.g. within NHS Digital, the electronic Referral Service, electronic Prescriptions Service, NHS Mail, the NHS Network, and many more will all have different and distinct requirements).

The list below provides some approximate numbers where available, however these are strictly for guidance and were a snapshot as of May 2016 – they are should not be treated as reliable indications of the total that exist.

¹⁶ Further information on TRUD plus the appropriate application forms to gain access can be found on the TRUD Welcome Page at <http://systems.digital.nhs.uk/data/uktc>

Type of Organisation/Organisation Name	Approximate Number
APPLIANCE CONTRACTOR	265
APPLICATION SERVICE PROVIDER	150
ENGLISH LOCAL AUTHORITY	794
CANCER NETWORK	57
CANCER REGISTRY	28
CARDIAC NETWORK	36
CARDIO-THORACIC TRANSPLANT CONSORTIUM	11
CARE HOME	11796
CARE TRUST	12
CERVICAL CYTOLOGY PATHOLOGY CLINIC	263
CLINICAL COMMISSIONING GROUP	302
CLINICAL NETWORK	37
COMMISSIONING SUPPORT UNIT	35
CRITICAL CARE NETWORK	1
DATA SERVICES FOR COMMISSIONERS REGIONAL OFFICE	11
DEFENCE MEDICAL SERVICES PRACTICE	195
GENERAL DENTAL PRACTICE	10332
GP PRACTICE	8500
HEALTH OBSERVATORY	11
INDEPENDENT SECTOR HEALTHCARE PROVIDER	1183
ISLE OF MAN NHS	4
LOCAL HEALTH BOARD	14
NHS ENGLAND	4
NHS SOCIAL ENTERPRISE	95
NHS SUPPORT AGENCY	199
NHS TRUST	237
NON-NHS ORGANISATION (Small independents e.g. physiotherapists, hypnotherapists etc.)	22014
NORTHERN IRELAND HEALTH & SOCIAL CARE BOARD	1
NORTHERN IRELAND HEALTH AND SOCIAL CARE TRUST	5
NORTHERN IRELAND LOCAL COMMISSIONING GROUP	5
OPTICAL SITE	6823
PATHFINDER CONSORTIUM	8
PATHOLOGY LAB	224
PATIENTS & PRACTITIONER SERVICES AGENCY	3
PHARMACY	16149
PRISON HEALTH SERVICE	280
SCOTTISH GP PRACTICE	1212
SCOTTISH HEALTH BOARD	26
SPECIAL HEALTH AUTHORITY	44
WALK IN CENTRE	151
WELSH ASSEMBLY	1
NATIONAL PRESCRIBING CENTRE	1
NHS EMPLOYERS	1
PUBLIC HEALTH LABORATORY SERVICE	1
RENAL REGISTRY	1

Type of Organisation/Organisation Name	Approximate Number
PARLIAMENTARY AND HEALTH SERVICE OMBUDSMAN	1
VETERANS AGENCY	1
NHS CONFEDERATION	1
PERINATAL INSTITUTE	1
APPOINTMENTS COMMISSION	1
SURGEON GENERAL	1
PUBLIC HEALTH ENGLAND	1
HEALTH AND SOCIAL CARE INFORMATION CENTRE	1
NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE	1
AUDIT COMMISSION	1
OFFICE FOR NATIONAL STATISTICS	1
HM REVENUE & CUSTOMS	1
DEPARTMENT FOR WORK AND PENSIONS	1
HOME OFFICE	1
DEPARTMENT OF HEALTH	1
MINISTRY OF DEFENCE	1
DEPARTMENT FOR TRANSPORT	1
NHS CENTRE FOR INVOLVEMENT	1
NHS CENTRAL REGISTRAR SCOTLAND	1
DIRECTORATE OF INFORMATION SYSTEMS NORTHERN IRELAND	1
ISLE OF MAN DEPARTMENT OF HEALTH	1
STATES OF JERSEY HEALTH AND SOCIAL SERVICES	1
STATES OF GUERNSEY HEALTH AND SOCIAL SERVICES	1
STATE OF ALDERNEY SOCIAL SECURITY AND MEDICAL CARE	1
NHS CANCER SERVICES COLLABORATIVE IMPROVEMENT PROGRAMME	1
NHS HEART IMPROVEMENT PROGRAMME	1
NATIONAL INSTITUTE FOR HEALTH RESEARCH	1

Table 7 – Indicative List of Stakeholders