Inpatient Census 2016

Mental Health and Learning Disability Patients: Out of NHS Scotland Placements Census (Part 2)

Document Version 2016/0.2







Document Type: Guidance Notes (Version 2016/0.2)

Collections: 1. Mental Health and Learning Disability Inpatient Bed Census (Part 1)

2. Mental Health and Learning Disability
Patients: Out of NHS Scotland Placements
Census (Part 2)

3. Hospital Based Complex Clinical Care Census (for patients who are not occupying Mental Health, Addiction and Learning Disability Inpatient Beds) (Part 3)

SG deadline: 31st May 2016

Coverage: Census date: Midnight, (end of) 31st March 2016

Document Details

Issue History

Version	Status	Authors	Issue Date	Issued To	Comments / changes
0.1		Ellen Lynch (on behalf of Working Group)			
0.2		David Scott			Added a column to indicate the tab in the XML spreadsheet to be completed for the corresponding question.

Contents

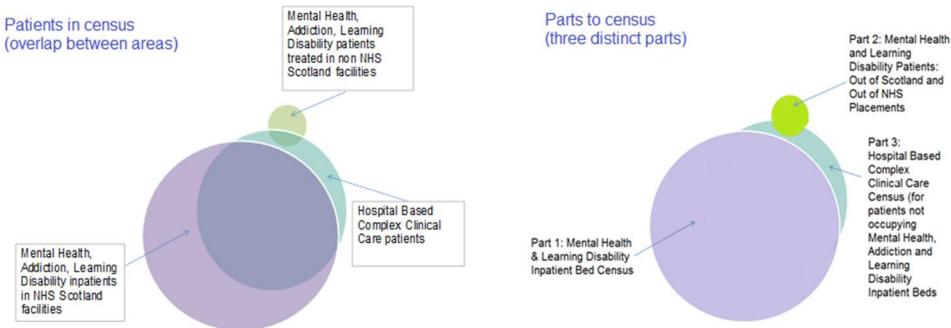
Scope of the Inpatient Census	5
Mental Health and Learning Disability Inpatient Bed Census (Part 1) Inclusion Criteria	6
Mental Health, Addiction and Learning Disability Patients: Out of NHS Scotland Placements Census (Part 2) Inclus Criteria	
Hospital Based Complex Clinical Care Census (Part 3) Inclusion Criteria	8
Mental Health, Addiction and Learning Disability Patients: Out of NHS Scotland Placements Census (Part 2): Introduction and FAQs	9
Why are the Scottish Government and NHS Scotland undertaking a census?	9
Who will use information from the census?	9
Which part of the Scottish Government are responsible for the census?	
How is the data kept secure by the Scottish Government?	10
Who can I contact if I want to ask questions on the guidance notes?	10
Who can I contact if I want to ask questions on IT/ ProcXed.Net?	
When will the census happen?	11
When do I have to submit the data by?	11
Purpose of this document	11
Mental Health, Addiction and Learning Disability Patients: Out of NHS Scotland Placements Census (Part 2): Ques and Definitions	
Annex 1: Location code	
Annex 2: Admission Reason	30
Annex 3: ICD10 Codes (International Classification of Diseases)	31

Scope of the Inpatient Census

The Inpatient Census consists of 3 parts:

- 1. Mental Health and Learning Disability Inpatient Bed Census (Part 1)
- 2. Mental Health, Addiction and Learning Disability Patients: Out of NHS Scotland Placements Census (Part 2)
- 3. Hospital Based Complex Clinical Care Census (for patients who are not occupying Mental Health, Addiction and Learning Disability Inpatient Beds) (Part 3)

Those completing any aspect of the Inpatient Census should carefully read the inclusion and exclusion criteria for the 3 parts to the census. <u>Patients should only appear in one part of the census</u>.



Mental Health and Learning Disability Inpatient Bed Census (Part 1) Inclusion Criteria

Information to be returned for every patient who is occupying a **psychiatric**, **addiction or learning disability inpatient bed** on the census date (midnight, (end of) 31st March 2016).

The Mental Health and Learning Disability Bed Census should include every dementia, learning disability, addiction, mental health, child mental health and forensic inpatient who is occupying psychiatric, addiction or learning disability bed on the census date.

Each NHS Board is responsible for supplying data for the **psychiatric**, **addiction or learning disability inpatient beds** within the NHS facilities in their area irrespective of where the patient being treated is from. For example, if a NHS Forth Valley patient is being treated in an NHS Greater Glasgow & Clyde psychiatric bed, then NHS Greater Glasgow & Clyde would be responsible for returning the information for that patient.

Inpatient bed must be within the NHS Scotland estate.

- Excluded are NHS Scotland funded patients who are treated:
 - o outwith Scotland (e.g. in NHS England facilities),
 - o in local authority, private and voluntary sector care homes
 - in private hospitals

Guidance notes and other key documents for the 'Mental Health and Learning Disability Inpatient Bed Census (Part 1)' can be found here: http://www.gov.scot/Topics/Statistics/Browse/Health/DataSupplier/Census2016

Mental Health, Addiction and Learning Disability Patients: Out of NHS Scotland Placements Census (Part 2) Inclusion Criteria

Information must be returned on every learning disability, addiction or mental health patient who NHS Scotland funds, but is treated either out of Scotland or out of NHS (e.g. in a private care home or private hospital) on the census day (midnight, (end of) 31st March 2016).

The Mental Health, Addiction and Learning Disability Patients: Out of NHS Scotland Placements Census should include every dementia, learning disability, addiction, mental health, child mental health and forensic inpatient who is occupying a bed out of Scotland or out with the NHS on the census day. Mental health, addiction or learning disability should be their primary diagnosis.

Each NHS Board is responsible for supplying data for the **psychiatric**, addiction or learning disability inpatients who they are responsible for overseeing the care package and who receive treatment out of NHS Scotland (e.g. in a private care home, local authority care home, private hospital, NHS England).

Information on patients who receive funding from NHS National Service Scotland for treatment out with Scotland or out of the NHS should be provided by the NHS Board who is responsible for overseeing the care package. This will usually be the territorial health board.

Guidance notes and other key documents for the 'Mental Health, Addiction and Learning Disability Patients: Out of NHS Scotland Placements Census (Part 2)' can be found here: http://www.gov.scot/Topics/Statistics/Browse/Health/DataSupplier/Census2016

Hospital Based Complex Clinical Care Census (Part 3) Inclusion Criteria

Information to be returned for every patient who is receiving Hospital Based Complex Clinical Care (HBCCC) as at the census date (midnight (end of) 31st March 2016).

For the Hospital Based Complex Clinical Care Census (part 3), the **patient will not** have a ready for discharge date (i.e. they cannot be a delayed discharge patient). HBCCC is defined as:

- The patient is eligible for HBCCC (as decided by the responsible consultant or equivalent specialist informed by the Multi-Disciplinary Team, see http://www.sehd.scot.nhs.uk/dl/DL(2015)11.pdf for further information). Essentially Hospital Based Complex Clinical Care refers to people who cannot have their care needs met in any setting other than hospital and require long-term complex clinical care (all patients who have been in hospital for 6 months or more should have been assessed for HBCCC). OR
- The patient has been in hospital for at least 6 months.

This includes patients who are receiving their treatment:

- Within NHS Scotland facilities (e.g. acute general hospitals, community hospitals), but see the 'excludes' section below.
- Out with NHS Scotland facilities but are funded by NHS Scotland (e.g. care homes, hospices, facilities in England), but see
 the 'excludes' section below.

The above criteria must be met for inclusion in the Hospital Based Complex Clinical Care Census (part 3).

Exclude:

- Patients who are receiving HBCCC in psychiatric, addiction or learning disability inpatient beds as they will be recorded separately as part of the 'Mental health & Learning Disability Bed Census' (part 1).
- Mental health, addiction or learning disability patients who are receiving HBCCC in non NHS Scotland facilities as they will be recorded separately as part of the 'Mental Health, Addiction and Learning Disability Patients: Out of NHS Scotland Placements Census' (part 2).

Guidance notes and other key documents for the 'Hospital Based Complex Clinical Care Census (Part 3)' can be found here: http://www.gov.scot/Topics/Statistics/Browse/Health/DataSupplier/Census2016

Mental Health, Addiction and Learning Disability Patients: Out of NHS Scotland Placements Census (Part 2): Introduction and FAQs

IMPORTANT: This document provides guidance notes for the 'Mental Health, Addiction and Learning Disability Patients: Out of NHS Scotland Placements Census (Part 2)' only. If you are responsible for completing the 'Mental Health and Learning Disability Inpatient Bed Census (Part 1)' and/or 'Hospital Based Complex Clinical Care Census (for patients who are not occupying Mental Health, Addiction and Learning Disability Inpatient Beds) (Part 3)' then please refer to their separate guidance notes which are available here: http://www.gov.scot/Topics/Statistics/Browse/Health/DataSupplier/Census2016.

Why are the Scottish Government and NHS Scotland undertaking a census?

The census collects information which is used by the Scottish Government and NHS Scotland to help plan for services in the short, medium and long term. For example, the information helps us understand if we have sufficient number of inpatient beds, if we need to provide more appropriate training for those people who are treating and caring for our patients. Furthermore, the analysis also lets Scottish Government and NHS Boards understand if and why there are variations in how services are delivered across Scotland. Finally, the information is used by the Scottish Government to inform policy development and is used to evidence legislation.

Who will use information from the census?

Statistical analysis from the census is used by many people and organisations. For example:

- NHS Scotland
- Scottish Government
- Mental Health Welfare Commission
- Integration Partnerships
- Royal College of Psychiatrists
- Patients
- Public
- Approved researchers working in the areas of mental health, addiction or learning disabilities.

Which part of the Scottish Government are responsible for the census?

Health Analytical Services Division (ASD) is one of a number of Analytical Services Divisions in the Scottish Government. Health Analytical Services Division's main objective is to continue to build the statistical, economic and research evidence base for Health and care in Scotland, and to provide analytical support, briefing and advice to support policy development and service planning.

The census is the responsibility of independent government statisticians who report to the Chief Statistician. The statisticians have a professional code of practice¹ which will be followed for this census. In addition, the census is also the responsibility of the Principal Medical Officer for Mental health (Scottish Government) as it contains health information.

The Scotxed Unit provide data collection and validation support for a number of statistical returns across the Scottish Government, including this census.

Scottish Government Policy Officers and Ministers have no access to the dataset, they only receive statistical analysis.

How is the data kept secure by the Scottish Government?

Information about how the Scottish Government collects, stores and restricts access to the datasets can be found in the Privacy Impact Assessment: http://www.gov.scot/Topics/Statistics/Browse/Health/DataSupplier/Census2016/PIA

Who can I contact if I want to ask questions on the guidance notes?

David Scott
Health Analytical Services Division
Scottish Government
Telephone: 0131 244 3435

e-mail: SWStat@scotland.gsi.gov.uk

Ellen Lynch
Health Analytical Services Division
Scottish Government
0131 244 4093

SWStat@scotland.gsi.gov.uk

 $^{^{1}\,\}underline{\text{http://www.statisticsauthority.gov.uk/assessment/code-of-practice}}$

Who can I contact if I want to ask questions on IT/ ProcXed.Net?

Raymond Buckley ScotXed Unit Scottish Government Telephone: 0131 244 0233

e-mail: ScotXed.ITSupport@gov.scot

When will the census happen?

Midnight, (end of) 31st March 2016

When do I have to submit the data by?

31st May 2016

Purpose of this document

These notes have been prepared by the Scottish Government and NHS Scotland to assist NHS Board and MIS (management Information Systems) developer and support staff to complete the 'Mental Health, Addiction and Learning Disability Patients: Out of NHS Scotland Placements Census (Part 2)'. The document provides information on the requirements for and the uses to be made of data.

All key documents (for example, Guidance Notes, IT information, FAQs) to support the census can be found here: http://www.gov.scot/Topics/Statistics/Browse/Health/DataSupplier/Census2016

There are 3 methods for NHS Boards to return data to the Scottish Government:

- Manually via eForm
- Bulk upload via XML spreadsheet template
- Bulk upload via XML file (Will require Health Board IT person to create MIS extract)

All 3 methods use the Scottish Government's secure data collection web tool: ProcXed.Net . Data will not be accepted by any other method. For NHS Boards which choose to use either the eForm or the XML spreadsheet template, or the MIS extract, precise details of the format of items - such as dates - are part of this guidance. It is very important to familiarise yourself with the expected format before completing any data. Software developers will ensure that values held in the MIS are converted to the format specified in the appropriate schema. A schema for the collection will be made available to those health boards who are interested in XML file upload method. The schema will be available when the requirements and the web platform developments are complete (currently estimated Dec 2015/Jan 2016). Please contact Raymond Buckley on the details above should you be considering the XML file upload method.

NHS Boards should ensure that all data on mental health, addiction and learning disability inpatients held in NHS Board MIS is maintained up-to-date and accurate. Validation checks are included within the web platform to help health boards identify data quality issues that require addressing at source. Good practice suggests that this can often be managed best by procedures and planning which spread the workload throughout the year. This can lead to advantages in dealing with the Census in March / April.

Mental Health, Addiction and Learning Disability Patients: Out of NHS Scotland Placements Census (Part 2): Questions and Definitions

Please note, that where a code is provided in the table below (for example in Q4, '2' for NHS England), then the data validation and collection tool (ProcXed.Net) will accept '2' **OR** 'NHS England'.

Question number	Data Item	Definition		Comments	Validation	Tab on spreadsheet
P2:Q1	Organisatio n Unique ID	for overseein irrespective of is being treated. Example: So overseeing the patient is recorded.	ard code which is responsible ing the care of the patient, of the location where the patient ted. 8000010 (NHS Lothian) is the care of the patient, but the reiving treatment at The Priory of the London. Code \$08000010 of the patient.		Any letters in this code need to be in upper case.	DataProvider
		S08000001	NHS Ayrshire & Arran			
		S08000002	NHS Borders			
		S08000003	NHS Dumfries & Galloway			
		S08000004	NHS Fife			
		S08000005	NHS Forth Valley			
		S08000006	NHS Grampian			
		S08000007	NHS Greater Glasgow & Clyde			
		S08000008	NHS Highland			
		S08000009	NHS Lanarkshire			

Question number	Data Item	Definition		Comments	Validation	Tab on spreadsheet
		S08000010	NHS Lothian			
		S08000011	NHS Orkney Islands			
		S08000012	NHS Shetland Islands			
		S08000013	NHS Tayside			
		S08000014	NHS Western Isles			
		S08100008	The State Hospital			
P2:Q2	Out of Scotland/N HS Placement	the patient. In the example North Londo If the facility	hat is providing care/treatment for ole above, 'The Priory Hospital, on' should be entered in this field. is not on the list then please (please specify)'.	See Annex 2 for the list of locations.		Locations
P2:Q3	Out of Scotland/N HS Placement other detail	is not on the Scotland/NH blank), provi	that is providing care/treatment list in Annex 1 (i.e. the 'Out of IS Placement' field has been left de details of location as free text full address and postcode).			Locations
P2:Q4	Sector of place of treatment	2 NHS Engla 3 Local Auth 4 Private 5 Voluntary 6 Other (plea	oority			Locations
P2:Q5	Sector of place of	Free text				Locations

Question number	Data Item	Definition	Comments	Validation	Tab on spreadsheet
	treatment (other please specify)				
P2:Q6	Patient identifier number (not CHI Number)	A Patient Health Record Identifier is a code (set of characters) used to uniquely identify a patient within a health register or a HEALTH RECORDS SYSTEM, e.g. PIMS	Optional data item in this instance		PatientDetails, MultipleResponses
P2:Q7	CHI	The Community Health Index (CHI) is a population register, which is used in Scotland for health care purposes. The CHI number uniquely identifies a person on the index. The current CHI number consists of the 6 digit Date of Birth (DDMMYY) followed by a 3 digit sequence number and a check digit. The tenth digit is always even for females and odd for males.	Optional data item in this instance This information will be encrypted once the data has been uploaded to Procxed.Net to protect patient privacy. This means the Scottish Government will not be able to see the CHI number, but instead a string of numbers. The encryption method will be shared with the CHI Team at ISD Scotland to enable data linkage (e.g. to SMR04) in the future.	10-digit number	PatientDetails
P2:Q8	Patient Forename	ProcXed.Net will convert into BLOCK CAPITALS for encryption purposes. NHS Boards will not need to convert to BLOCK CAPITALS in advance of uploading/manually	This is additional information for quality assurance purposes and to enable matching to other		PatientDetails

Question number	Data Item	Definition	Comments	Validation	Tab on spreadsheet
		entering data into ProcXed.Net.	data. This information will be encrypted one way once the data has been uploaded to Procxed. Net to protect patient privacy. This means the Scottish Government will not be able to see the patient's forename, but instead a string of numbers. The encryption method will be shared with the CHI Team at ISD Scotland to enable data linkage (e.g. to SMR04) in the future.		
P2:Q9	Patient middle names	ProcXed.Net will convert into BLOCK CAPITALS for encryption purposes. NHS Boards will not need to convert to BLOCK CAPITALS in advance of uploading/manually entering data into ProcXed.Net.	This is additional information for quality assurance purposes and to enable matching to other data. This data item is Not Mandatory . This information will be encrypted one way once the data has been uploaded to Procxed.Net to protect patient privacy.		PatientDetails

Question number	Data Item	Definition	Comments	Validation	Tab on spreadsheet
			This means the Scottish Government will not be able to see the patient's middle name, but instead a string of numbers.		
			The encryption method will be shared with the CHI Team at ISD Scotland to enable data linkage (e.g. to SMR04) in the future.		
P2:Q10	Patient Surname	ProcXed.Net will convert into BLOCK CAPITALS for encryption purposes. NHS Boards will not need to convert to BLOCK CAPITALS in advance of uploading/manually entering data into ProcXed.Net.	This is additional information for quality assurance purposes and to enable matching to other data.		PatientDetails
			This information will be encrypted one way once the data has been uploaded to Procxed.Net to protect patient privacy.		
			This means the Scottish Government will not be able to see the patient's surname, but instead a string of numbers.		
			The encryption method will be shared with the CHI Team at ISD Scotland to		

Question number	Data Item	Definition	Comments	Validation	Tab on spreadsheet
			enable data linkage (e.g. to SMR04) in the future.		
P2:Q11	Date of Birth	The date on which a person was born, or is officially deemed to have been born, as recorded on the Birth Certificate. If only the patient's age is known the year of birth should be calculated and the day and month put as zero e.g. an Age of 55 in 2000 would be 00-00-1945. If all avenues have been explored and neither the date of birth nor age is available then the clinician's or nursing staff's estimate of age should be used to calculate the year of birth, with zero entered for the day and month of birth. If this is not possible, refer to your Health Records Manager.	All dates must be entered in the format DD/MM/CCYY, using either dashes (-) or backslashes (/) as the separator, e.g. 09-02-1942 or 09/02/1942 for 9 th February 1942. All dates must consist of eight digits by entering preceding zeros for single digits in day or month and the full four-digit year must be recorded. It is essential that date of birth is completed as accurately as possible to enable analysis by age to be undertaken.		PatientDetails
P2:Q12	Gender	Codes and Values: Sex (gender) codes 1 - Male 2 - Female 98 - Other			PatientDetails
P2:Q13	Postcode of Patient's home address	Up to 8 characters. Will show the patient's Current Postcode	This is the postcode of the private home, care home or hospice where the patient resides as at the date of the		PatientDetails

Question number	Data Item	Definition	Comments	Validation	Tab on spreadsheet
			census. Every effort should be made to accurately record this data item.		
			The postcode should be left justified and include the space, e.g. KY4 8DW, EH12 8JH, G4 6HR.		
			If a postcode cannot be found using the Postcode Directory, the appropriate Postcode Enquiry Office should be contacted. Where a patient's address is not known and all reasonable means of attempting to trace the address have been exhausted, the following entry should be put in the postcode field: NK01 0AA. If the patient has no fixed abode, NF1 1AB should be recorded for the postcode.		
P2:Q14	Health Board Responsibl e for Funding	Provide details of the Health Board responsible for funding the patient's current inpatient treatment e.g. the patient's treatment may be funded by National Services Division. S08000001 NHS Ayrshire & Arran			PatientDetails

Question number	Data Item	Definition	Comments	Validation	Tab on spreadsheet
		S08000002 NHS Borders S08000003 NHS Dumfries & Galloway S08000004 NHS Fife S08000005 NHS Forth Valley S08000006 NHS Grampian S08000007 NHS Greater Glasgow & Clyde S08000008 NHS Highland S08000009 NHS Lanarkshire S08000010 NHS Lothian S08000011 NHS Orkney Islands S08000012 NHS Shetland Islands S08000013 NHS Tayside S08100008 The State Hospital S08200001 England/Wales/Northern Ireland S08200002 S08200003 Not Known S08200004 Outside U.K. SD001 National Services Division			
P2:Q15	Local Authority Responsibl e for Funding	Please provide the code representing the local authority responsible for providing funding if the patient requires local authority services (e.g. social care services, housing support services). 100 Aberdeen City 110 Aberdeenshire 120 Angus 130 Argyll & Bute 150 Clackmannanshire			PatientDetails

Question number	Data Item	Definition	Comments	Validation	Tab on spreadsheet
		170 Dumfries & Galloway 180 Dundee City 190 East Ayrshire 200 East Dunbartonshire 210 East Lothian 220 East Renfrewshire 230 Edinburgh, City of 235 Eilean Siar 240 Falkirk 250 Fife 260 Glasgow City 270 Highland 280 Inverclyde 290 Midlothian 300 Moray 310 North Ayrshire 320 North Lanarkshire 330 Orkney Islands 340 Perth & Kinross 350 Renfrewshire 355 Scottish Borders 360 Shetland Islands 370 South Ayrshire 380 South Lanarkshire 390 Stirling 395 West Dunbartonshire 400 West Lothian			
P2:Q16	Placement Funding	1 Voluntary 2 Private			PatientDetails

Question number	Data Item	Definition	Comments	Validation	Tab on spreadsheet
	Sources in addition to NHS and Local Authority	98 Other 99 Not Known 96 Not Applicable			
P2:Q17	Placement Funding Sources in addition to NHS and Local Authority other detail	If select 'Other' in 'Placement Funding Sources in addition to NHS and Local Authority', provide details as free text.			PatientDetails
P2:Q18	Is the patient in receipt of Hospital Based Complex Clinical Care (HBCCC)?	HBCCC patients cannot have a ready for discharge date (i.e. they cannot be a delayed discharge patient). HBCCC is defined as: • The patient is eligible for HBCCC (as decided by the responsible consultant or equivalent specialist informed by the Multi-Disciplinary Team, see http://www.sehd.scot.nhs.uk/dl/DL(20 15)11.pdf for further information). Essentially Hospital Based Complex Clinical Care refers to people who cannot have their care needs met in any setting other than hospital and require long-term complex clinical care (all patients who have been in hospital for 6 months or more should		Check there is no ready for discharge. Check against date of admission.	PatientDetails

Question number	Data Item	Definition	Comments	Validation	Tab on spreadsheet
		 have been assessed for HBCCC). OR The patient has been in hospital for at least 6 months. 1 Yes 0 No 			
P2:Q19	Admission date for inpatient episode.	An inpatient admission is the date the patient first presents to the Emergency Department or to the hospital and undergoes the full admission procedure and is accepted by the hospital. The full admission procedure may be defined as the completion of all registration documents including the recording of the patient's name in the admission register or system. This marks the start of an inpatient episode. The patient may then be transferred to another ward, hospital, care home or hospice. The date of admission therefore may differ from the date the patient was admitted to the facility they are currently resident in. Only required for patients who are in receipt of Hospital Based Complex Clinical Care.	All dates must be entered in the format DD/MM/CCYY or DD-MM-CCYY using either dashes (-) or backslashes (/) as the separator, e.g. 09-06-2014 or 09/06/2014 for 9th June 2014. All dates must consist of eight digits by entering preceding zeros for single digits in day or month and the full four-digit year must be recorded. Only required for patients who are in receipt of Hospital Based Complex Clinical Care.	Must be on or before date of Census.	PatientDetails
P2:Q20	Admission date to	Admission Date is the date on which the patient starts their inpatient stay in the out of	All dates must be entered in the format DD/MM/CCYY or	Must be on or before date of	PatientDetails

Question number	Data Item	Definition	Comments	Validation	Tab on spreadsheet
	current facility	Scotland/out of NHS facility.	DD-MM-CCYY using either dashes (-) or backslashes (/) as the separator, e.g. 09-06-2014 or 09/06/2014 for 9 th June 2014. All dates must consist of eight digits by entering preceding zeros for single digits in day or month and the full four-digit year must be recorded.	Census.	
P2:Q21	Reason for admission	Admission reason indicates the primary reason why a patient is admitted for an inpatient stay to the out of Scotland/out of NHS facility. See Annex 2 for full list of codes			PatientDetails
P2:Q22	Is the patient being managed primarily by forensic services?	1 Yes 0 No			PatientDetails
P2:Q23	What was the date of the last time the patient's care was reviewed by the place	e.g. Review could be via phone call, visit, the sharing of care plan electronically between organisations etc.	All dates must be entered in the format DD/MM/CCYY or DD-MM-CCYY using either dashes (-) or backslashes (/) as the separator, e.g. 09-06-2014 or 09/06/2014 for 9 th June 2014.		PatientDetails

Question number	Data Item	Definition	Comments	Validation	Tab on spreadsheet
	providing the care and the NHS Scotland Board which is responsible for overseeing the patient's care?		All dates must consist of eight digits by entering preceding zeros for single digits in day or month and the full four-digit year must be recorded.		
P2:Q24 – Q27	Mental Health/Lear ning Disability diagnosis / provisional diagnosis as at census	A main condition (primary, under Q24) and up to three secondary conditions (Q25-27) - four conditions in total - can be recorded in the admission section. The main condition is the diagnosis most relevant to the reason for admission and should be drawn from Chapter V, ICD10 codes (F00- F99). See Annex 3.	NHS Boards should provide the '*' where the ICD10 code requires it e.g. F00.1* Including Dementia Cannot accept Z code for "assessment". Please provide a provisional diagnosis code.		PatientDetails OR MultipleResponses (if ICD10 codes only, without description, are being provided)
P2:Q28	Other diagnoses / co morbidities as at census date (ICD10 codes)	Physical health morbidities should be recorded here. A main condition and up to four other conditions (five conditions in total) can be recorded If ICD10 codes are not currently recorded, then NHS Boards should record - '100'.			PatientDetails OR MultipleResponses (if ICD10 codes only, without description, are being provided)

Question number	Data Item	Definition	Comments	Validation	Tab on spreadsheet
		If 'other diagnoses / co morbidities' are not known then please record '99'.			
		If the patient has no physical health morbidities then please record '95'.			
P2:Q29	Diagnosis as at census date – free text	If ICD10 codes are not recorded by the care home/hospital then free text diagnosis information can be provided instead. If entering more than one condition in the free text field, use a comma to separate the conditions.			PatientDetails
P2:Q30	Daily cost to NHS Scotland of Current Placement	Daily cost in 2015/16			PatientDetails
P2:Q31	Anticipated Discharge/T ransfer back to NHS Scotland Date	Anticipated date of return to home or ordinary residence or anticipated date of transfer back to NHS Scotland. If this is not available, please include the Review Date for this patient.	All dates must be entered in the format DD/MM/CCYY, using either dashes (-) or backslashes (/) as the separator, e.g. 09-06-2014 or 09/06/2014 for 9 th June 2014.	Must be on or after census date	PatientDetails
			All dates must consist of eight digits by entering preceding zeros for single digits in day or month and the full four-digit year must be recorded.		
P2:Q32	Anticipated Discharge/T	1 Anticipated Discharge2 Anticipated Transfer back to NHS	All dates must be entered in the format DD/MM/CCYY,	Must be after the census	PatientDetails

Question Dannumber	ata Item	Definition	Comments	Validation	Tab on spreadsheet
bac NH Sco	ick to	Scotland 3 Review Date	using either dashes (-) or backslashes (/) as the separator, e.g. 09-06-2014 or 09/06/2014 for 9 th June 2014. All dates must consist of eight digits by entering preceding zeros for single digits in day or month and the full four-digit year must be recorded.	date.	

Annex 1: Location code

Location Code	Hospital/Care Home
Nam NILIO Englistan in Cont	امما

Non-NHS Facilities in Sco	otland
A213B	The Ayr Clinic
A240V	Cumbrae Lodge Nursing Home
F1	Bandrum Nursing Home, Dunfermline
G2	The Priory, Glasgow
G3	Surehaven, Drumchapel
S1	Huntercombe Hospital, Edinburgh
S2	Castle Craig Hospital, West Linton
T18	Clement Park Care Home
T2	Levenglen Nursing Home, Glenlomond
T330V	Monroe House, Dundee
V1	Clare House, Dunblane
Y1	Mannering Avenue, Dumfries
Y2	Trinity, Lockerbie
Facilities Outwith Scotlan	
S312H4	Alpha Hospital, Bury
OW01	Brighton Nuffield Hospital
OW02	Danshell, Birmingham
OW03	Farndon Unit, Raphael Healthcare, Nottinghamshire
OW04	Hertfordshire NHS Foundation Trust
OW05	John Denmark Unit, Manchester
OW06	Manchester NHS Trust
OW07	National Autistic Service, Lancaster
OW08	Newbus Grange, Northumbria
OW09	Northgate Hospital, Northumberland
OW10	Northumberland, Tyne & Wear NHS Trust
OW11	Nottinghamshire Healthcare NHS Trust
OW12	Oaklands Residential Service, Hexham
OW13	Partnerships in care - Spinney
OW14	Partnerships in care, Calverton Hill
OW15	South London and Maudsley NHS Foundation Trust
OW16	South West London & St George's Mental Health NHS Trust
OW17	St Andrews Healthcare, Northampton
OW18	St Mary's Hospital, Warrington
OW19	Stockton Hall Hospital. York
OW20	Tavistock and Portman NHS Foundation Trust
OW21	Tees & Esk Valley NHS
OW22	The Dene, Partnerships in Care
OW23	The Priory Hospital, North London
OW24	The Retreat, York
OW25	Wells Unit
OW26	Westlane Hospital, Westwood Centre, Middlesbrough

Other		
98	Other (please specify)	

Annex 2: Admission Reason

10 11	Acute Admission no additional detail added Acute Admission for treatment
12	Acute Admission for Pre-operative preparation
13	Acute Admission for Observation
14	Acute Admission for Radiotherapy/Chemotherapy
15	Acute Admission for Rehabilitation
16	Acute Admission for Convalescence
17	Acute Admission for Self-medication training
18	Other type of Acute Admission
19	Acute Admission, type not known
13	Acute Admission, type not known
1A	Acute Admission for Professional examinations (i.e. medical staff undergoing exams)
1B	Acute Readmission for treatment, same condition (e.g. incomplete abortion following
40	complete abortion episode)
1C	Acute Admission for Self-inflicted injury
1D	Acute Admission for Assessment
1E	Acute Admission for Accidental Injury
1F	Acute Admission for Other injury
1G	Acute Admission for Clinical drug trials
1H	Acute Admission for Assault
1J 1K	Acute Admission for Respite care
ıĸ	Acute Admission for Investigation
40	Geriatric Admission, no additional detail added
41	Geriatric Admission for Continuing Care
42	Geriatric Admission for Respite Care - planned
43	Geriatric Admission for Respite Care - non-elective
44	Geriatric Admission awaiting local authority residential home
45	Geriatric Admission awaiting private residential home
46	Geriatric Admission awaiting voluntary residential home
47	Geriatric Admission awaiting nursing home care
48	Other type of geriatric admission
49	Geriatric admission, type not known
4A	Geriatric Admission for Assessment
50	Mental Health Admission, no additional detail added
51	Mental Health Admission for Diagnostic
52	Mental Health Admission for Therapeutic/Clinical crisis
53	Mental Health Admission for Self-inflicted injury
54	Mental Health Admission for Poisoning
55	Mental Health Admission for Accidental injury
56	Mental Health Admission for Other injury
57	Mental Health Admission for Rehabilitation
58	Mental Health Admission for Other type of psychiatric admission
5A	Mental Health Admission for Admission after extended pass
5B	Mental Health Admission for Respite/holiday care
5C	Mental Health Admission for Learning disability

Annex 3: ICD10 Codes (International Classification of Diseases)

Available on the World Health Organisation website:

http://apps.who.int/classifications/icd10/browse/2010/en

Also available in

The document "Data Specification: Mental Health and Learning Disability Patients:
 Out of NHS Scotland Placements Census (Part 2), 2016" defines the format, potential values and number of occurrences of each data item in the collection.