

Data Dictionary Change Notice NHS Wales Informatics Service Data Standards

Subject(s):	Changes to Family Planning References
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The NHS Wales Data Dictionary can be accessed via the following link:

http://www.datadictionary.wales.nhs.uk/

Reason for Change

To update the NHS Wales Data Dictionary to reflect the current terminology associated with sexual and reproductive health care services.

Description of Change

The term "Family Planning" is no longer used by healthcare organisations who provide or commission these services.

Approval for the use of the term "Sexual and Reproductive Health" has been given by the Faculty of Sexual and Reproductive Healthcare, the Health Professions Council and the British Association for Sexual Health and HIV.

This Data Dictionary Change Notice updates all references to "Family Planning" in the NHS Wales Data Dictionary with the new terminology of "Sexual and Reproductive Health", which has been adopted throughout the National Health Service.



<u>Section 1: Table reflecting areas that are impacted as a result of this DDCN</u>

The following table shows all parts of the dictionary, including data sets, data items, terms and other associated areas that are linked with the changes documented within this DDCN.

Each dictionary section and data definition type is listed in alphabetical order and is shown in the sequence in which it appears in this DDCN.

Data Definition Type	Name	New/Retired /Changed	Page
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Section 2: Highlighted changes to be made to the NHS Wales Data Dictionary

Changes to the NHS Wales Data Dictionary are detailed below, with new text being highlighted in **blue** and deletions are shown with a **strikethrough**. The text shaded in **grey** shows existing text copied from the NHS Wales Data Dictionary.

Changes to Aggregate Proformas

Korner - List

KC61 – Pathology Laboratories Cervical Screening Return

Change History	
DDCN 2011/05	Changes to Family Planning References
DSCN 08/04 (W)	KC61 Pathology Laboratories Cervical Screening Return

The Department, NHS Cervical Screening Programme (NHSCSP) and Local Health Boards require information on Cervical Screening.

The information helps to monitor the process of achieving the Government's target to reduce the incidence of invasive cervical cancer and to ensure that the screening programme is managed effectively.

Information about cervical smears examined by pathology laboratories is collected on the KC61 return, which includes symptomatic smears as well as smears examined as a result of uptake of invitations for screening.

This is an annual return providing information up to the year end of 31 March. The return is expected to be produced within 2 months of this date.

The return is made up of the Parts A – C.

Part A: Number of smears examined by pathology laboratories, and number found inadequate, by source of smear and result of test

Part A is broken down by laboratory and provides data on the number of results recorded, showing figures by <u>Smear Source Type</u> and <u>Cytology Result Type</u>.

Part B: Result of test, by laboratory

Part B provides information against each laboratory and relates to the results of smears examined. But only those results where the Smear Source Type is classified as either General Medical Practitioner or NHS Community Clinic (this includes Sexual and Reproductive Health Family Planning Clinics, Well Women clinics and young persons' clinics, other than those run by General Medical Practitioners) are counted.

Figures are broken down by Cytology Result Type, and by age bands. The band is the age of the woman at the date of the smear and not the woman's age on 31 March. The



age bands range from Under 20, to over 75.

Part C: Outcome for women recommended for gynaecological referral during April xxxx - March xxxx

Part C provides data, broken down by laboratory, analysing the number of women subsequently referred for gynaecological investigation the previous year following an abnormal smear. This is where the Cytology Screening Action Type has a status of 'Refer for medical assessment or under medical treatment (Suspend) (S)'.

This data is commonly displayed by separating the figures for low grade results (inadequate / borderline / mild dyskaryosis) and high grade results (moderate dyskaryosis or worse) the Positive Predictive Values are calculated from the high grade figures.

Figures are given for women by <u>Cytology Result Type</u> and by <u>Biopsy Referral Outcome</u>. <u>Cytology Result Type</u> with a value of *Negative* are not counted.

Korner - Terms

Action Taken - KO41(A)/KO41(B)

Admission - KO36

Age - KO36, KC55, KC57, KC64

Ambulance Service - KA34

Assessment - KC62

Beds - KO36

Biopsy Referral Outcome - KC61, KC65

Cancers Diagnosed - KC62

Care Group (Cds) - KC64

Category II Work - KH12

Cervical Cytology Screening - KC53, KC61

Colposcopy – KC65

Colposcopy Prime Procedure Type – KC65

Colposcopy Results Type – KC65

Colposcopy Visit Type – KC65

Community Dental Services (Cds) - KC64

Community Episode - KC50-57

Community-Type Residential Unit for the Mentally Handicapped - KC55

Complaint_- KO41(A)/KO41(B)

Contact - KC55-60, KT31

Contact (Community Dental Service) - KC64

Contraception- KT31

<u>Cross Section Analysis of Population Coverage within Period 1/4/XXXX – 31/3/XXXX - KC63</u>

Cytology Results Type – KC53, KC61

Cytology Screening Action Type – KC61

Data Completeness Indicators - KC62

Day Care Attendance - KH14

Day Care Facility (NHS) - KH14

Day Care Function - KH14

Day Care Session - KH14

Day Case - KO36

Dental Health Education - KC64

Dental Health Programme - KC64

Dental Intervention - KC64



Dental Officer - Kc64

Department - KH12

Detained Patient - KP90

Domiciliary Visit - KC50-64, KT31

Dual Registration - KO36

Early Recalls - KC62

ECG (Electrocardiogram) Request - KH12

EEG (Electroencephalogram) Request - KH12

Emergency Call - KA34

Emergency Journey - KA34

Epidemiology- KC64

Episode Of Care (Community Dental Services) - KC64

Family Planning Sexual and Reproductive Health Clinic - KT31

First Contact - KC55, KC57, KT31

First Invitation for Routine Screening - KC62

Function - KH14

General Anesthetic - KC64

Group Session - KC57

Handicap - KC64

Hospice - Kc55, KC57

Hours Worked - KC64

Hygienist - KC64

Initial Contact - KC57, KC60

Intervention - KC64

Invitations and Outcomes - KC62

Isotope Procedure Request - KH12

Legal Status - KP90

Location Of Contact - KC55, KC57, KC64

Mental Category - KP90

Nurse (Other) - KC55

Operating Theatre - KO36

Outcome Measures - KC62

Patient Journey - KA34

Patient's Home - KC55, KC57

Percentile Time Values - KA34

Permanent Resident - KO36

Place Days - KH14

Population - KC64

Preventive Programmes (Cds) - KC64

Primary Course Of Immunisation - KC50

Priority Of Journey - KA34

Proxy Contact - KC55, KC57

Psychiatric Patient - KP90

Psychopathic Disorder - KP90

Reason For Referral (Cds) - KC64

Regular Attendee Episode - KH14

Regular (Day) Attendee - KH14

Request/Source Category - KH12

Request For Diagnostic Test - KH12

Resident - KO36

Resident Medical Staff - KO36

Residential Accommodation - KC55, KC57

Response Time - KA34

Routine Invitation to Previous Attendees (last screen more than 5 years previously) -

KC62

Routine Invitation to Previous Attendees (last screen within 5 years) - KC62



Routine Invitation to Previous Non-attendees - KC62

School Premises - KC55, KC57

Screening Invitation Date - KC53

Screening Invitation Type - KC53

Screening Programmes - KC53, KC64

Screening Status - KC53

Screening Test Date - KC53

Self/GP Referrals of Women Not Screened Previously - KC62

Self/GP Referrals of Women Not Screened Previously (last screen more than 5 years

previously) - KC62

Self/GP Referrals of Women Screened Previously (last screen within 5 years) - KC62

Sexually Transmitted Diseases - KC60

Short Stay Beds - KO36

Short Stay Resident - KO36

Skin Test - KC50

Smear Source Type – KC61

Source Of Referral (Cds) - KA34

Special Journey - KA34

Specialty Function - KH14

Staff Numbers - KO36

Standard Whole Time - KO36

Status of Cancer - KC62

Supported Resident - KO36

Target Numbers - KC64

Target Population - KC50-53

Therapist (Cds) - KC64

Treatment - KC64

Tuberculin Skin Test_- KC50

Type Of Complaint - KO41 (A)/KO41 (B)

Type Of Intervention - KC64

Urgent Journey- KA34

Women with Open Episodes - KC63

Younger Physically Disabled - KH14



Changes to Appendices

5. Specialty Codes (Alphabetical)

SPECIALTY	INCLUDES		CODES	
		SPECIALTY (GENERAL)	SUB- SPECIALT Y	MANPOWER (Where Equivalent)
Accident and emergency	head injuries	180	1	030
Anesthetics	intensive care unit, intensive therapy unit	190	I.	091
Audio logical medicine		310	-	019
Blood transfusion		821	_	092
Cardiology - Paediatric Cardiology	coronary care, pacemaker, high dependency unit	320 320	100	007
Cardio-thoracic surgery - Cardiac surgery - Thoracic surgery - Paediatric Cardiac surgery	cardiac surgery, thoracic surgery	170 170 170 170	100 200 300	029
Chemical pathology	biochemical endocrinology, chemical toxicology, clinical biochemistry	822	-	072
Child and adolescent psychiatry	mental illness (children), adolescent psychiatry units, child and family guidance, family therapy	711		053
Clinical Cytogenetics & molecular genetics		312	-	079
Clinical genetics	genetics, medical genetics	311	-	020
Clinical immunology and allergy		313	-	-



Clinical Naura	applied Floatra	401		014
Clinical Neuro- physiology	applied Electro- physiology, electro- encephalography, neurological physiology	401		014
Clinical Oncology	joint radiotherapy, chemotherapy, hormone treatment	800	-	026
Clinical pharmacology and therapeutics		305		010
Clinical physiology	clinical measurement, clinical rheology, medical physics, physiology	304	•	013
Community Medicine	I	900	-	-
Dental medicine specialties	oral microbiology, oral pharmacology, oral pathology, oral medicine, dental radiology, dental anesthesia	450		065
Dermatology	leprology, allergy clinics	330	-	005
Diabetes and endocrinology		-	-	017
Ear nose and throat (ENT)	audiology, otology, otorhinolaryngolog y	120	-	-
Endocrinology	diabetes	302	-	
Sexual and reproductive healthFamily planning session - anaesthetics		-	-	-
Sexual and reproductive healthFamily planning session - surgery		•	•	
Forensic psychiatry		712		054
Gastroenterology	liver diseases	301	-	018
General medicine	chemotherapy, experimental medicine, endoscopy, homeopathy,	300		001



	human metabolism, medical care of chronic sick & epileptics, drug dependency (non- psychiatric), sterile unit, toxicology, units for the younger physically disabled, tropical medicine, war pensioners			
General pathology	(not appropriate for staff in senior grades)	820	•	071
General practice (maternity)	I	610	1	
General practice (other)	GP medical, GP dental	620	-	-
General surgery	surgical appliances unit, hand surgery, rectal surgery, vascular surgery, vasectomy	100	1	021
Genitourinary medicine	sexually transmitted diseases	360	-	009
Geriatric medicine	Polish patients (excluding psycho- geriatrics)	430	-	011
GP vocational trainees working in General Practice	excludes those working in hospital, for which the relevant specialty should be used	•	1	
Gynecology	sexual and reproductive healthfamily planning, infertility, cervical cytology, human reproduction, colposcopy, well woman	502		-
Hematology		-	-	073
Hematology (clinical)	anti-coagulant clinics, hemophiliacs, bone marrow units	303	1	1
Hematology		823	-	-



(non-clinical)				
Histopathology	cancer research, cytology	824	1	074
Immunopatholog y	clinical Immunopathology	830	-	077
Infectious diseases	tropical medicine	350	-	003
Intensive Therapy	I	1	-	-
Joint consultant clinics	I	990	-	-
Medical microbiology	bacteriology, parasitology (microbial genetics)	831	1	075
Medical oncology	chemotherapy for malignant diseases	370	-	012
Medical ophthalmology	I	460	-	096
Mental handicap		700	-	-
Mental illness	psychiatry (excluding child and adolescent psychiatry, and old age psychiatry), addiction (including alcohol), drug dependence (psychiatric)	710		
Midwifery		560	-	-
Nephrology	artificial kidney, hemodialysis, renal research, renal medicine	361	1	1
Neurology - Spinal Injuries - Other Neurology	cerebral palsy, epilepsy, paraplegia, spinal injuries	400 400 400	- 100 900	006
Neuropathology		832		-
Neurosurgery	pediatric Neurosurgery	150	-	031
Nuclear medicine	physicians with a special interest in nuclear medicine, radioactive isotope clinical investigation	371		016
Nursing		950	-	-
Obstetrics		-	-	



Obstetrics and gynecology	I	-	-	040
Obstetrics (in- patients & day cases)		501		
Obstetrics ante- natal (out- patients)	genetic counselling	510		1
Obstetrics post- natal (out- patients)		520		
Occupational medicine	occupational health, industrial health, industrial medicine	901		093
Old age psychiatry	elderly mentally infirm, psychogeriatrics	715	1	056
Ophthalmology	contact lenses	130		025
Oral surgery	maxillo-facial surgery	140	-	061
Orthodontics		143	-	062
Other specialties		-	-	099
Otolaryngology	ear nose and throat, audiology	-	-	023
Pediatric cardiology		-		097
Pediatric dentistry		142	1	064
Pediatric neurology		421	1	049
Pediatric surgery	neonatal surgery	171		022
Pediatrics	special care baby unit, intensive therapy units for babies, child assessment unit, spina-bifida unit	420	•	002
Pain Management		191		-
Palliative medicine	pain relief, terminal care, continuing care	315		094
Plastic surgery - Burns surgery - Plastic Surgery (non burns)		160 160 160	- 200 100	028 - -
Psychotherapy		713	-	055
Radiology	mass radiography, Neuro-radiology	810	1	080



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Radiotherapy	see "Clinical Oncology"		1	'
Rehabilitation		314		084
Restorative dentistry	conservative dentistry, periodontology, prosthetics	141		063
Rheumatology	physical medicine, physiotherapy, rheumatism, stroke unit	410		008
Thoracic medicine	diseases of the chest, pneumoconiosis, research in acute respiratory failure, tuberculosis, asthma	340		
Trauma and orthopedics	Orthopaedic surgery, traumatic surgery, hand surgery, osteopathy	110	1	024
Urology	Urodynamic, continence, eneuretic	101	-	027
Virology		-	-	-



Appendix E - Genito-Urinary Medicine Codes

Genito-Urinary Medicine Clinics (Diagnostic Codes)

CODE	CONDITION	homosexual acquisition	age group
	Syphilis		
A1	Infectious syphilis: acquired, primary	*	* *
A2	Infectious syphilis: acquired, secondary	*	* *
A3	Infectious syphilis: acquired, latent in first two years of infection	*	
A4	Other acquired syphilis: cardiovascular	*	
A 5	Other acquired syphilis: syphilis of the nervous system	*	
A6	Other acquired syphilis: latent syphilis after the first two years of infection and all other late or latent stages	*	
A7	Congenital syphilis: aged under 2 years		
A8	Congenital syphilis: aged 2 or over		
А9	Epidemiological treatment of suspected syphilis: includes all cases where syphilis has not been confirmed but epidemiological treatment is being given	*	I
	Gonorrhea		
B1,B2	Uncomplicated gonorrhea (includes post- pubertal uncomplicated gonorrhoea previously recorded under B1.1 – B1.3 and pre-pubertal gonorrhea previously recorded under code B2	*	**
В3	Gonococcal ophthalmic neonatorum		* *
B4	Epidemiological treatment of suspected gonorrhea: includes all cases where gonorrhea has not been confirmed but epidemiological treatment is being given	*	
B5	Gonococcal complications (includes other complicated gonorrhea excluding PID and epididymitis previously recorded under B1.4a and B5 and Gonococcal infections previously recorded under B1.4b and B1.4c)	*	
	Other genital conditions		
C1	Chancroid		
C2	Lymphogranuloma venereum (LGV)		
C3	Donovanosis (granuloma inguinale)		
C4a	Chlamydia, post-pubertal uncomplicated: lower genital tract, anorectum, mouth, throat and eye infections	*	* *



C4b	Chlamydia, post-pubertal: upper genital tract or systemic complications – excluding pelvic inflammatory disease (PID) and epididymitis (includes Chlamydia previously recorded under B1.4c or C4f)	*	
C4c	Pre-pubertal chlamydia	*	* *
C4d	Chlamydia ophthalmic neonatorum		
C4e	Epidemiological treatment of suspected Chlamydia: includes all cases where Chlamydia has not been confirmed but epidemiological treatment is being given	*	
C4h	Non-specific urethritis (NSU)	*	
C4i	Epidemiological treatment of NSU and related diseases such as proctitis and cervicitis: includes all cases where NSU has not been confirmed but epidemiological treatment is being given, and suspected cases of nonspecific proctitis and cervicitis.	*	
C5	Chlamydia infection/NSU with arthritis	*	
C6a	Trichomoniasis		
C6b	Anaerobic/bacterial vaginosis and male infection		
C6c	Other vaginosis/vaginitis/balanitis		
C7a	Anogenital candidosis		
C7b	Epidemiological treatment of C6 and C7		
C8	Scabies	*	
C9	Pediculosis	*	
C10a	Anogenital herpes simplex: first attack. Refers to those cases where the patient has never (as far as can be ascertained) been previously treated for genital herpes by any medical practitioner.	*	**
C10b	Anogenital herpes simplex: recurrence. Refers to all other episodes of genital herpes	*	
C11a	Anogenital wart virus infection: first attack. Refers to those cases where the patient has never (as far as can be ascertained) been previously treated for genital warts by any medical practitioner.	*	* *
C11b	Anogenital wart virus infection: recurrence. Refers to all other episodes of genital warts	*	
C11c	Anogenital wart virus infection: reregistered cases.		
C12	Molluscum contagiosum.	*	
C13	Antigen positive viral hepatitis B. Refers too newly diagnosed cases. Excludes patients being treated for other conditions who are known to be carriers (previously recorded under code C13a).	*	
C14	Other viral hepatitis. Refers to newly diagnosed	*	



	cases Evaluate nations heing treated for other		
	cases. Excludes patients being treated for other conditions who are known to be carriers (previously recorded under C13b).		
	Other conditions		
D2a	Urinary tract infection		
D2b	Other conditions requiring treatment at GUM clinic (previously recorded under D2).		
D3	Other episodes not requiring treatment		
	HIV infection and AIDS		
E1a	Asymptomatic HIV infection: first presentation. Refers only to newly diagnosed cases of HIV without symptoms	*	
E1b	Asymptomatic HIV infection: subsequent presentation. Refers to cases already known to be positive and attending for routine checks. Excludes patients known to be carriers who are attending for treatment for other conditions not related to the virus (NB: All subsequent presentations to be recorded on KC60)		
E2a	HIV infection with symptoms, not AIDS: first presentation. Refers to cases presenting for the first time with symptoms (but whose symptoms do not satisfy the criteria for AIDS) (previously recorded under E2).	*	
E2b	HIV infection with symptoms, not AIDS: subsequent presentations. (NB: For KC60 a patient must be recorded only once under E2 but may or may not have previously been recorded under E1)		
E3a	AIDS: first presentation. Refers to cases presenting for the first time with AIDS	*	
E3b	AIDS: subsequent presentations. (NB: For KC60 a patient must be recorded only once under E3 but may or may not have previously been recorded under E1 or E2)	*	
P1a	HIV antibody counselling – with testing	*	* *
P1b	HIV antibody counselling – without testing	*	
P2	Hepatitis B vaccination	*	
P3	Sexual and Reproductive HealthFamily Planning		
P4a	CIN – minor abnormality		
P4b	CIN – major abnormality		

Notes:

1	*	If a male patient is believed to have acquired a condition through	
		homosexual contact, this must be noted for all appropriate	

^{*}See notes
**See notes



	conditions.
2**	The age group of the patient should be recorded for selected conditions. Grouped as follows:
a)	under 15
b)	15
c)	16 – 19
d)	20 – 24
e)	25 – 34
f)	35 – 44
g)	45 – 64
h)	65 and over
i)	All ages (total of the above)
3	For the purposes of KC60, certain conditions are grouped together:
A1,2	Primary and secondary infectious syphilis
A4 – 6	Other acquired syphilis (A4, A5 & A6)
B1,B2	Uncomplicated gonorrhea (B1 & B2)
C1 – 3	Chancroid/LGV/Donovanosis (C1, C2 & C3)
C4a,C4c	Uncomplicated Chlamydia infection (C4a & C4c)
C8 – 9	Scabies/Pediculosis (C8 & C9)
4	Common abbreviations:
AIDS	Acquired immune deficiency syndrome
HIV	Human immunodeficiency virus
LGV	Lymphogranuloma venereum
NSU	Non-specific urethritis
PID	Pelvic inflammatory disease



Changes to Terms

Contact

This is a face-to-face meeting with a patient or client or the person's proxy (e.g. a person looking after elderly relative) where care is given. Care may be in the form of treatment, advice, support or examination.

Generally, a contact will be pre-arranged but in exceptional circumstances a casual meeting may result in a substantial amount of advice or support being given – and should also be counted as a contact.

The Client: A person who is the target of a community professional advice and support programme.

First contact: the first time a patient receives care, in the period covered by the return, from a staff member of the relevant group. There can be only one first contact per patient in the period for each staff group, even if the location or type of contact changes e.g. a change from clinic attendance to home visits.

Initial contact: the first in an episode of care (e.g. community episode) which is unaffected by changes of location or type of contact.

Refers to:

a.	A new patient or client.
b.	An existing patient with a new condition.
C.	A completely new episode for the same condition e.g. a patient who underwent a short course of treatment at the start of the year and was recalled six months later has two initial contacts.

Notes:

1.	A visit as part of an episode which started in a previous financial year is not an initial contact.
2.	An existing patient with a new condition e.g. a known hepatitis carrier treated for syphilis is an initial contact only for the new condition i.e. syphilis.
3.	Count: A contact by more than one nurse or ancillary staff member from the same programme as one contact. A joint visit by a midwife and a health visitor to the same client as one contact, under whichever staff group is most appropriate to the circumstances. Contact with two staff members from different programmes (even where they both fall under the category "other nursing staff") as two contacts. Contact with an auxiliary nurse alone. Repeated contacts during the course of a day at a day care facility as one contact with each patient per day for each relevant staff group. The following as a single contact: 4. A visit by mother and baby to a post-natal clinic. ii. Each woman attending a midwife-run clinic. A couple seen together for sexual and reproductive healthfamily planning services.
4.	Do not count:



Contacts occurring in the course of consultant out-patient clinics (wherever these are held).

Contacts with hospital inpatients (definition includes patients living in a community-type residential unit for the mentally handicapped). Attendances at group sessions e.g. for health education (except face to face contacts where individual attention is given to a client).

Core Sexual Health Services

Change History	
DDCN 2011/05	Changes to Family Planning References
DSCN (2008) 09 (W)	Access to Core Sexual Health Services

Core Sexual Health Services are those services that are provided by Trusts, which are consultant led and can be nurse delivered, as part of an integrated Genitourinary Medicine (GUM) and Sexual and Reproductive HealthFamily Planning Service.

The Integrated sexual health service will provide enhanced sexual health and reproductive services, including management, treatment and partner notification for Sexually Transmitted Infections and specialist contraceptive services that include choice within products to maximise client acceptability e.g. condoms, and a range of oral contraceptives and Long Acting Reversible Contraceptives.

Sexual and Reproductive Health Family Planning Clinic

Change History	
DDCN 2011/05	Changes to Family Planning References
DSCN 22/02 (W)	Data Standards: KT31 – Family planning revised Central Return
DSCN 22/02 (W) Annex A	Data Standards: KT31 – Family planning revised Central Return
DSCN 22/02 (W) Annex B	Data Standards: KT31 – Family planning revised Central Return
DSCN 22/02 (W) Annex C	Data Standards: KT31 – Family planning revised Central Return

A clinic specifically to provide sexual and reproductive healthfamily planning services for the NHS.

Excludes:

a)	Clinics run by consultants
b)	Work in GP surgeries or by GPs on hospital premises



c) The work of voluntary or commercial organisations

Location of Contact

This is the type of physical location at which contact occurs between a health care practitioner and a patient or client (or proxy).

Codes * and definitions have been devised to enable the classification of location type. Each location must be classified by only one location type, regardless of the type of activity, specialty or client involved. The location type should only be altered if there is a complete change in use.

 Location type codes are not used in the central returns and are therefore outside the scope of this volume.

Location types are classified as follows:

a)	Clients or patient's home: the private residence (temporary or permanent) of the client or patient.
	Includes: foster home, hotel, bed & breakfast accommodation, university halls of residence, staff accommodation (e.g. nurses home), sheltered accommodation and other accommodation which may be used as a client's home.
	Excludes: residential institutions mentioned elsewhere in this classification.
b)	Health centre: an NHS owned or leased facility for use by local GPs and supporting local related services.
c)	Other GP premises: premises mainly used by a GP practice for patient consultations. The distinguishing feature from a health centre is that no health care services, other than those provided directly by the GP practice, are based at the premises.
d)	DAY CARE FACILITY, managed by the NHS at any site.
e)	Other clinic premises managed by the NHS
i.	Consultant clinic premises: NHS managed premises used mainly for patients to attend for consultation, examinations, investigation and/or treatment including minor operative procedures. The distinguishing feature is that the main use of the premises is for hospital consultant/consultant firms and diagnostic health professionals employed by a Local Health Board, to come into face-to-face contact with their patients.
	Includes: Out-Patient departments, A & E, Radiotherapy, Radiology and Physiological measurement departments
	Excludes: Wards, premises used primarily for day care, Paramedical departments and any other premises separately identified, Pathology departments and other areas not usually used for face-to-face contacts.
ii.	Health clinic premises: † non-hospital premises used for clients to attend for consultation, examinations, assessment and/or treatment. The distinguishing feature is that the main use of the premises is for community medical officers (including community pediatricians), community nurses, health visitors, community

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	dentists and other health professionals to come into face-to-face contact with their clients.
1	Includes: Child guidance centres, child assessment centres, sexual and reproductive healthfamily planning clinics and other "client-contact" health premises.
	Excludes: location types defined elsewhere in this classification.
iii.	Resource centre premises: † non-residential premises for the use of multi-disciplinary or specialist teams to see clients or patients either as referrals or self-referrals for treatment, advice and information. The provision of Resource Centres is usually for the care of those persons with mental health or mental handicap problems.
	Excludes: location types defined elsewhere in this classification.
f)	Elsewhere on hospital site or community type residential site.
	NB. A community style residential site for the mentally handicapped is a facility staffed by the NHS and managed separately from any hospital, which is located in the community and provides not more than 24 residential places for persons with a mental handicap; the facility, using primarily locally based resources, provides the residents with staffed accommodation, room, board and supervision; it might also provide other services, e.g. day care, to other people with a mental handicap.
	Residents at such a site are defined as hospital inpatients.
	This category includes:
i.	Ward: all wards on a NHS managed hospital site inclusive of wards open day-time only. Includes wards in NHS Hospices and NHS GP Hospitals.
ii.	Paramedical department: † premises, not defined above, which are provided mainly for the use of paramedical professionals (inclusive of audiology technicians).
iii.	Other health or local authority site thus located.
g)	Nursing home:
i.	NHS nursing home: staffed by nurses 24 hours a day, with facilities for client/patient's requiring residential nursing care provided by the NHS. Medical care continues to be the responsibility of the client/patient's GP. The premises may be used for nursing people suffering from sickness, injury or infirmity: pregnant women or women after childbirth: provision for certain services such as endoscopy or premises used for nursing or treatment for mentally disordered patients (mental nursing home).
h)	Hospice: non-NHS managed residential premises, voluntary or private, registered under section 23 of the Registered Homes Act 1984, for the provision of clinical pain relief and professional nursing care to resident patients who are terminally ill.
i)	Local authority residential accommodation: residential care homes which are managed by local authority:
i.	Group home: † Residential accommodation provided to cater for a small group of vulnerable persons (those with learning disabilities or who are mentally ill). Such premises are not normally staffed by nurses but may be staffed by care assistants during the day.



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V.	Other health or local authority site ‡ thus managed
n)	Other:
	Managed by the NHS off NHS Hospital or community type residential sites.
i.	Group home ‡
ii.	Paramedical department ‡
iii.	Other health or local authority site ‡ thus managed
iv.	Prison department establishment: includes detention centres, youth custody centres and prisons.
V.	Public place or street: includes Police Station.
vi.	Other location: <i>includes</i> : First aid rooms in factories, Health facilities in universities, the private homes of health or social service professionals, other locations not classified elsewhere

† Appears more than once, classified by the management of the premises. ‡ Defined above.

Locations of dental contacts for KC64 have a separate classification.

See Community Dental Services

Smear Source Type

This is the source of smears examined by Pathology Laboratories, for which statistical information is to be gathered.

Classifications are:-

General Medical Practitioners

NHS Community Clinic - this includes Sexual and Reproductive HealthFamily Planning Clinics, Well Women Clinics and young persons' clinics, other than those run by General Medical Practitioners

GUM Clinic

NHS Hospital

Private

Other