Ref: FOI/GS/ID 6901

13 October 2021

Freedom of Information Act 2000

I am writing in response to your request for information made under the
Freedom of Information Act 2000 in relation to Accident and Emergency
Diagnosis Coding and Descriptions.

You asked:
1. (a)With regard to the following Accident and Emergency Diagnosis Code
(and/or treatment Code; whichever is applicable): '8582' what is the specific
name of the respective coding database/data set and the corresponding
version and the applicable date range when the Trust used this code?
(b) What is the corresponding full diagnosis descriptor and/or if relevant,
treatment descriptor?
(c) Please provide the corresponding word descriptor for each of the numbers
within the code "8582".
2. (a) with regard to the Accident and Emergency diagnosis descriptor:
'Other Soft Tis Inj. Neck,'
what is the specific name of the database/data set and the corresponding
version and applicable date range when the Trust used this diagnosis
descriptor?
(b) What is the corresponding code used within the Trust's patient records?
(c) What is the corresponding code used within Trust information reported to
the Secondary Use Service (SUS) and the Hospital Episode Statistics (HES)
data?
3. (a) With regard to the Accident and Emergency diagnosis descriptor:
'Other Soft Tis Inj. Neck, Not applicable'
what is the specific name of the respective database/data set used in 2012
and the corresponding version and applicable date range in which the above
diagnosis descriptor was used by the Trust?
(b) What is the corresponding Accident and Emergency diagnosis code
relevant to the above diagnosis descriptor within the same database/dataset
which was used within patient records by the Trust at the time?

(c) What is the corresponding code used within Trust information reported to the Secondary Use Service (SUS) and the Hospital Episode Statistics (HES) data in 2012?

4(a) With regard to the Accident and Emergency Investigation descriptor: 'X-ray or Blood tests'

what is the specific name of the database/data set and the corresponding version and applicable date range when this Investigation descriptor was used by the Trust?

(b) What is the corresponding code relevant to the above Investigation descriptor within the same database/dataset?

(c) What is the corresponding code used within Trust information reported to the Secondary Use Service (SUS) and the Hospital Episode Statistics (HES) data?

5(a) With regard to the Accident and Emergency Investigation descriptor: 'X-ray plain film'

what is the specific name of the database/data set and the corresponding version and applicable date range when the above Investigation descriptor was used by the Trust?

(b) What is the corresponding code relevant to the above Investigation descriptor within the same database/dataset?

(c) What is the corresponding code used within Trust information reported to the Secondary Use Service (SUS) and the Hospital Episode Statistics (HES) data;

6(a) with regard to the possible Accident and Emergency diagnosis descriptor: 'Other Soft Tis Inj. Shoulder,'

If this is a historically identified diagnosis descriptor, please confirm whether the Trust has ever used this and if so, what is the specific name of the database/data set and the corresponding version and applicable date range when the Trust used this diagnosis descriptor?

(b) If applicable, what is the corresponding code used within the Trust's patient records?

(c) If applicable, what was the corresponding code used within Trust information reported to the Secondary Use Service (SUS) and the Hospital Episode Statistics (HES) data from April 2012 onwards?

7(a) with regard to the Accident and Emergency diagnosis descriptor: 'Acute limb injury, leg,' *ALI what is the specific name of the database/data set and the corresponding version and applicable date range when the Trust used this diagnosis descriptor?*

(b) What is the corresponding code used within the Trust's patient records?

(c) What is the corresponding code used within Trust information reported to the Secondary Use Service (SUS) and the Hospital Episode Statistics (HES) data?

8(a) with regard to the Accident and Emergency diagnosis descriptor: 'Whiplash' what is the specific name of the database/data set and the corresponding version and applicable date range when the Trust used this diagnosis descriptor?

(b) What is the corresponding code used within the Trust's patient records?

(c) What is the corresponding code used within Trust information reported to the Secondary Use Service (SUS) and the Hospital Episode Statistics (HES) data?

9(a) with regard to the Accident and Emergency diagnosis descriptor:
'Acute torticollis,'
what is the specific name of the database/data set and the corresponding version and applicable date range when the Trust used this diagnosis descriptor?
(b) What is the corresponding code used within the Trust's patient records?
(c) What is the corresponding code used within Trust information reported to the Secondary Use Service (SUS) and the Hospital Episode Statistics (HES) data?
10.(a) What is the corresponding descriptor for Code 19153 (which may be a LOCAL SUB-SPECIALTY CODE within CDS Trust use only?
11. Who, within the Trust, is responsible for the following?
(a) updating accident and emergency data bases
(b) managing and accessing archived data bases/sets
12. (a) who has authorised access to* historical individual patient records stored on the Trust's onsite systems?
*including the facility to amend historical patient personal data
13. Who within the Trust is currently responsible for:
(a) investigating alleged breaches of the data legislation?
(b) rectifying inaccurate and incomplete personal data?
14. (a) What software system was in use by the Trust in December 2020, in respect of onsite storage, retrieval and printing of historical patient records?
(b) In what data format are historical patient records, which are held onsite, accessed, processed and printed off?
15. (a) Were all Accident & Emergency recorded patient diagnoses reported as diagnostic codes to the Secondary Use Service (and when applicable, the Hospital Episode Statistics) from April 2012 onwards?
(b) Within the Trust's Accident and Emergency computer system used in April 2012, was there only the facility to record the 'Primary Diagnosis' and 'Diagnosis Comments', and no facility within the software to record specific secondary and third diagnoses when inputting the data in real time, other than within the 'Diagnosis Comments' field?
16. How many historical patient letters*, when copied and sent to patients under a Subject Access Request (SAR) or FOI Request, have been reported to the Trust as containing a different or missing diagnosis descriptor, and/or a different investigation descriptor, to that contained within the corresponding original letter?
*(which were originally written pre-2017 data changes).

Trust response:
1-9.
The Trust uses Snomed coding for recording Diagnoses in the Emergency Departments as per the Emergency Care Data Set (ECDS) requirements – full details can be found here - ECDS guidance - NHS Digital. The guidance includes details of diagnosis coding, both the Snomed codes and descriptors. The Trust currently uses an Allscripts Electronic Patient Record 'Sunrise' in our Emergency Departments. Previous to that the Trust used a system called Symphony was which provided by EMIS (and Footman-Walker prior to that). The Trust migrated to Sunrise in July 2021.

10. We do not recognise this code as it is not in the format the trust uses for local specialities.

11.

(a) Clinical Systems Management Team

(b) Clinical Systems Management Team and the Data Warehousing Team.

12. (a) The Trust provides access to patient records to all staff members required to carry out their job role (including the facility to amend historical personal data, if required)

13.

(a) Head of Information Governance

(b) Data Quality team

14.

(a) 75% of the Trust historical patient records are paper based, these would be stored onsite and at Chatham Archives. Electronic records are stored in our eNotes System

(b) 75% of the Trust historical patient records are paper based, these would be stored onsite and at Chatham Archives. Electronic records are stored in our eNotes System

15.

(a) Yes

(b) I have been unable to get a response for this question. Please contact me again if you wish me to continue to chase a response.

16. 1 under SAR