



NHS Improvement
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Health and Social Care Information Centre
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Leeds
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11 December 2020

Dear Sarah Wilkinson

1. NHS Improvement's Mandatory Request to NHS Digital – Patient Level Information and Costing Systems (PLICS) Ambulance, PLICS Mental Health and PLICS Improved Access to Psychological Therapies (IAPT) for Financial Year 2019/2020 data.

1.1 I am writing on behalf of Monitor (hereafter referred to as **NHS Improvement**) to make a mandatory request to the Health and Social Care Information Centre, known as and hereafter referred to in this Request as **NHS Digital**.

1.2 This mandatory request is made under sections 255(1), 256(1)(a) and 256(2)(a) of the Health and Social Care Act 2012 (“the 2012 Act”) that NHS Digital establish and operate a system for the collection and analysis of PLICS data from Ambulance, Mental Health and IAPT providers in accordance with this request.

1.3 I have set out below full details of the relevant functions of NHS Improvement, and the drivers for and benefits of our Costing Transformation Programme to which the aforementioned collections are a key enabler.

2. NHS Improvement's functions

2.1 Under Chapter 4, Part 3 of the 2012 Act, NHS Improvement (working with NHS England), is responsible for developing, publicising and enforcing the national tariff, which includes the local pricing rules for commissioning of NHS services.

- 2.2 NHS Improvement is also responsible for licensing providers of NHS services under Chapter 3, Part 3 of the 2012 Act. The licence includes a set of standard licence conditions, including:
- conditions applicable to foundation trusts relating to governance arrangements (e.g. there is a requirement for licensees to establish and implement systems and/or processes to ensure compliance with licensee's duty to operate efficiently, economically and effectively); and
 - conditions that enable NHS Improvement to fulfil its duties to set prices (and rules on local pricing) for NHS care by requiring providers to collect costing information.
- 2.3 Although NHS trusts do not have to hold a provider licence, they too must comply with the requirements of these licence conditions under the NHS Trust Development Authority's regime for NHS trusts.
- 2.4 NHS Improvement has a general power under paragraph 15 of Schedule 8 to the 2012 Act, to do anything which appears to it to be necessary or expedient for the purposes of, or in connection with, the exercise of our function.

3. Purpose - Costing Transformation Programme

- 3.1 Understanding how providers spend money is essential in tackling short-term deficits; supporting the development of new models of care and reducing the variation in resource utilisation.
- 3.2 Benchmarking using current Reference Cost data cannot identify precisely where there is potential for efficiency gains. Such data is limited in its ability to reflect the complexity of an incident and patient care or identifying cost variation between individual incidents and patients. By introducing a standardised method of reporting cost information at patient level (for Mental Health and IAPT services) and at incident level (for ambulance services) this can be rectified.
- 3.3 It is not always possible for ambulance services to know who the patient they are treating is. Coupled with this, systems to capture patient-level data in ambulance services are not widely used. Therefore, the intended method of the costing described here for ambulance services is to cost at an incident level and collect patient-level information relating to each incident where possible. The incident level costs can then be split to determine the costs of patient(s) involved. This is referred to as Patient Level Information and Costing Systems (**PLICS**) data in ambulance services.
- 3.4 The information gathered from this programme will be used to enable NHS Improvement to perform its pricing and licensing functions under the 2012 Act more effectively. It will:

- inform the rules and guidance we provide on the payment arrangements for ambulance services;
- inform any future proposals for the payment arrangements for ambulance services;
- inform new approaches and other changes to the design of the currencies used to price NHS services;
- contribute to NHS England and NHS Improvement's strategic objective of a 'single national cost collection';
- identify the relationship between provider characteristics and cost;
- help trusts to maximise use of their resources and improve efficiencies, as required by the provider licence;
- identify the relationship between incident characteristics and cost; and
- support an approach to benchmarking for regulatory purposes.

4. **Mandatory request**

4.1 Under sections 255(1), 256(1)(a) and 256(2)(a) of the 2012 Act, NHS Digital is requested to establish and operate a system for the collection and analysis of PLICS data, from up to 10 ambulance providers, 46 mental health providers and 46 IAPT providers.

- The identities of the ambulance providers from whom PLICS data is to be collected is set out in Annex B (as may be updated from time to time as provided for at 4.2 below).
- The identities of the mental health providers from whom PLICS data is to be collected is set out in Annex D (as may be updated from time to time as provided for at 4.2 below).
- The identities of the IAPT providers from whom PLICS data is to be collected is set out in Annex F (as may be updated from time to time as provided for at 4.2 below).

Together all such ambulance, mental health and IAPT providers are referred to in this request as "**Provider Trusts**".

4.2 In the event any of the Provider Trusts are not able to participate in this data collection exercise, then NHS England and NHS Improvement shall provide an updated Annex B, D and/or F to NHS Digital at the earliest opportunity.

4.3 The term "**PLICS data**" is used in this request to refer to:

- The data set out at Annex A for ambulance providers;
- The data set out at Annex C for mental health providers;

- The data set out at Annex E for IAPT providers.

4.4 The system to be established and operated under this request will need to have the following functionality:

- Data collection - ability for Provider Trusts to submit PLICS data direct to NHS Digital;
- Potential to link PLICS data with relevant activity and outcome data held by NHS Digital to be agreed between NHS Digital and NHS England and NHS Improvement via data specifications;
- Data quality and validation; and
- Data supply – the functionality to provide, where appropriate in accordance with NHS Digital's functions, pseudonymised PLICS data to NHS England and NHS Improvement for onward processing and analysis to be agreed between NHS Digital and NHS England and NHS Improvement via data specifications.

4.5 There are four 'levels' of data requiring collection by NHS Digital as part of the Costing Transformation programme; collectively these will form the data extract requested by NHS England and NHS Improvement. The four levels referred to are:

- Message Header Information
- Reconciliation tables
- Activity Records; and
- Activity Costs Records.

The detail of what is included for each of the above is found in Annex A for ambulance providers, Annex C for mental health providers and Annex E for IAPT providers.

5. Confidential collection request

This request is a confidential collection request in accordance with sections 256(1)(a) and 256(2)(a) of the 2012 Act.

6. Requirement for this mandatory request

6.1 NHS Improvement (listed as "Monitor") is a "principal body" under section 255(9) of the 2012 Act and is therefore eligible to make a "mandatory request" for the purposes of section 255(4)(a) of the 2012 Act.

6.2 I have set out above how the collection of PLICS data is relevant to NHS Improvement's pricing functions. In accordance with sections 255(2) and 255(4)(b) NHS Improvement considers that the information which could be obtained by

complying with the request is information which it is necessary or expedient for NHS Improvement to have in relation to its discharge of its duties:

- (a) in relation to the pricing of health care services provided for the purposes of the NHS in England; in particular, its duty to prepare and publish the national tariff (section 116 and 118 of the 2012 Act); and
- (b) generally in relation to the exercise of its functions, in particular its duty under section 62(1) of 2012 Act in exercising its functions (including its licensing functions in Part 3 of Chapter 3 of the 2012 Act) to protect and promote the interests of people who use health care services by promoting provision of health care services which is economic, efficient and effective, and maintains or improves the quality of the services.

6.3 Prior to making this request, NHS Improvement has liaised and worked with NHS Digital as required by 257(4) of the 2012 Act and recognises this request must go through an established system of approvals within NHS Digital.

7. Dissemination

In making this mandatory request, NHS Improvement also requests that, pursuant to section 262(4) of the 2012 Act, NHS Digital exercises the powers it has (and may choose which of its powers to exercise at its sole discretion) to disseminate the information which it obtains by complying with this request, so as to provide information to a Provider Trust to enable it to re-identify the individuals who were the subject of the PLICS data which that Provider Trust had submitted.

8. Fees

NHS Improvement recognises that in submitting this request under section 255 of the 2012 Act, NHS Digital is entitled to charge a reasonable fee pursuant to section 257(3) in respect of the cost of complying with this request from NHS England and NHS Improvement.

9. Duration

9.1 This data collection exercise is expected to take place during January 2021. The collection year begins on 1 April 2019 and ends on 31 March 2020.

9.2 NHS Digital is requested to operate the Mandatory Request for Patient Level Information and Costing Systems (PLICS) Ambulance, PLICS Mental Health and PLICS Improved Access to Psychological Therapies (IAPT) (**the Requested Function**) until the data has been collected, processed and analysed and relevant analysis published unless (during the programme of works) it is deemed ineffective by the NHS Improvement Costing Transformation Programme Director. At the point, that it is deemed ineffective NHS England and NHS Improvement will formally withdraw this request in writing to NHS Digital.

Yours sincerely

A handwritten signature in black ink that reads "Helen Laing". The signature is written in a cursive style with a distinct loop at the end of the last name.

Helen Laing
Deputy Director of Costing

Annex A – Data to be collected from Ambulance Providers

Costing Transformation Programme Data Extract Requirements

NHS Digital is being asked to collect information on four levels, which collectively form the extract requested by NHS England and NHS Improvement:

- The message header
- Reconciliation tables
- The activity records
- The activity cost records

Message Header (Reconciliation)

Field Name	Description
Organisation identifier (Code of submitting organisation)	Organisation identifier (Code of submitting organisation) is the organisation identifier of the organisation acting as the physical sender of a data set submission.
Financial year	The financial reporting period
Reporting period start date	The start of the reporting period the extract covers
Reporting period end date	The end of the reporting period the extract covers
Date and time data set created	The date and time the extract was created.
Patient level costing care activity type code	The data set the extract covers.

Message Header (Activity)

Field Name	Description
Organisation identifier (Code of submitting organisation)	Organisation identifier (Code of submitting organisation) is the organisation identifier of the organisation acting as the physical sender of a data set submission.
Financial year	The financial reporting period
Reporting period start date	The start of the reporting period the extract covers
Reporting period end date	The end of the reporting period the extract covers
Date and time data set created	The date and time the extract was created.
Patient level costing care activity type code	The data set the extract covers.
Patient level costing submission record count	The total number of activity records included in the monthly extract.
Patient level costing care monthly extract total cost	The total sum of the costs within the monthly extract.

Reconciliation tables

Final audited accounts table

Field Name	Description
Final audit accounts ID	Identifier which describes the financial transactions charged to the statement of comprehensive income.
Cost or income value	Financial transaction value.

Service and cost exclusions

Field Name	Description
Service ID	Identifier to report services and costs excluded from the data set.
Total cost	The total cost on a full absorption basis, which should be sum of patient facing and support costs for all resources and activities reported in the service and cost exclusions

Activity Information – Ambulance incidents

Field Name	Description
Personal and Demographic Details	
Organisation Identifier (Code of Provider)	ORGANISATION IDENTIFIER (CODE OF PROVIDER) is the ORGANISATION IDENTIFIER of the Organisation acting as a Health Care Provider
Organisation Identifier (Code of Commissioner)	ORGANISATION IDENTIFIER (CODE OF COMMISSIONER) is the ORGANISATION IDENTIFIER of the Organisation commissioning health care.
NHS number	The primary identifier of a person within the NHS in England and Wales.
NHS number status indicator code	Codes in this field indicate whether the patients' NHS number is present, and if it is verified. If the NHS number is absent, the indicator gives the reason why.
Care Activity Details	
Incident ID	Local incident identifier
Source of Call	Source of call code
Call Category	Call category used for reporting purposes
Multi-Patient Incident	This field is to specify whether the incident involved more than one patient
Number of Response Units Mobilised for Incident	Number of response units mobilised to incident
Number of Response Units arriving on scene	Number of response units arriving on scene of the incident
Number of Response Units arriving at treatment centre	Number of response units arriving at a treatment centre
Incident date and time	The incident date and time as used for reporting
Job cycle duration (seconds)	Job cycle duration in seconds.
Responder Type	Response unit type(s) arriving on scene to the incident
Organisation identifier of handover destination	Organisation identifier of handover destination is the ORGANISATION IDENTIFIER of the Organisation acting as the Health Care Provider following an incident handover.
Currency Details	
Incident currency	The currency classification of the incident. See the guidance document for more information on this.

Costing information

Field Name	Description
Patient level costing collection activity identifier	Unique identifier to report activities, which are measurable amount of work performed using resources to deliver elements of patient care. Patient activity can be recorded and reported through various feeder systems.
Patient level costing collection activity count	The number or duration of activities undertaken, eg number of tests or duration in theatre
Patient level costing collection resource identifier	Unique identifier to report resources, which are components used to deliver activities, such as staffing, supplies, systems and facilities.
Patient level costing collection total cost	The unit cost for each resource and activity combination reported in the service, patient facing and support costs should be reported separately.

Activity to be submitted

The collection year begins on 1 April 2019 and ends on 31 March 2020. All incidents started within the collection year are in scope of this collection.

Annex B: Ambulance PLICS provider trusts

NHS Code	Organisation Name
RX9	EAST MIDLANDS AMBULANCE SERVICE NHS TRUST
RYC	EAST OF ENGLAND AMBULANCE SERVICE NHS TRUST
RRU	LONDON AMBULANCE SERVICE NHS TRUST
RX6	NORTH EAST AMBULANCE SERVICE NHS FOUNDATION TRUST
RX7	NORTH WEST AMBULANCE SERVICE NHS TRUST
RYE	SOUTH CENTRAL AMBULANCE SERVICE NHS FOUNDATION TRUST
RYD	SOUTH EAST COAST AMBULANCE SERVICE NHS FOUNDATION TRUST
RYF	SOUTH WESTERN AMBULANCE SERVICE NHS FOUNDATION TRUST
RYA	WEST MIDLANDS AMBULANCE SERVICE NHS FOUNDATION TRUST
RX8	YORKSHIRE AMBULANCE SERVICE NHS TRUST

Annex C – Data to be collected from Mental health providers

Costing Transformation Programme Data Extract Requirements

NHS Digital is being asked to collect information on four levels, which collectively form the extract requested by NHS England and NHS Improvement:

- The message header
- Reconciliation tables
- The activity records
- The activity cost records

Message Header (Reconciliation)

Field Name	Description
Organisation identifier (Code of submitting organisation)	Organisation identifier (Code of submitting organisation) is the organisation identifier of the organisation acting as the physical sender of a data set submission.
Financial year	The financial reporting period
Reporting period start date	The start of the reporting period the extract covers
Reporting period end date	The end of the reporting period the extract covers
Date and time data set created	The date and time the extract was created.
Patient level costing care activity type code	The data set the extract covers.

Message Header (per Activity feedtype)

Field Name	Description
Organisation identifier (Code of submitting organisation)	Organisation identifier (Code of submitting organisation) is the organisation identifier of the organisation acting as the physical sender of a data set submission.
Financial year	The financial reporting period
Reporting period start date	The start of the reporting period the extract covers
Reporting period end date	The end of the reporting period the extract covers
Date and time data set created	The date and time the extract was created.
Patient level costing care activity type code	The data set the extract covers.
Patient level costing submission record count	The total number of activity records included in the monthly extract.
Patient level costing care monthly extract total cost	The total sum of the costs within the monthly extract.

Reconciliation tables

Final audited accounts table

Field Name	Description
Final audit accounts ID	Identifier which describes the financial transactions charged to the statement of comprehensive income.
Cost or income value	Financial transaction value.

Service and cost exclusions

Field Name	Description
Service ID	Identifier to report services and costs excluded from the data set.
Total cost	The total cost on a full absorption basis, which should be sum of patient facing and support costs for all resources and activities reported in the service and cost exclusions.

Activity Information – Mental health provider spells

Field Name	Description
Personal and Demographic Details	
Organisation identifier (Code of provider)	Organisation identifier (Code of provider) is the Organisation identifier of the organisation acting as a health care provider.
Care Activity Details	
Service request identifier	The unique identifier for a SERVICE REQUEST for the Health Care Provider.
Hospital provider spell number	A number to provide a unique identifier for each hospital provider spell for a health care provider.
Start date (Hospital provider spell)	The start date of a Hospital Provider Spell.
Discharge date (Hospital provider spell)	The discharge date from a Hospital Provider Spell.
Spell type	Field to indicate whether the spell completed within the financial year, or is still open at the end of the financial year.
Currency Details	
Patient cluster assessment status	Field to indicate whether the patient has either been assigned an ADULT MENTAL HEALTH CARE CLUSTER CODE that is still within its assessment period, was assessed but not accepted into service, has not been assessed or clustered or the patients treatment is not a clustered mental health service.
Patient cluster assessment status start date	The start date of the Patient cluster assessment status
Patient cluster assessment status end date	The end date of the Patient cluster assessment status
Adult mental health care cluster code	The allocation of the ADULT MENTAL HEALTH CARE CLUSTER CODE by the CARE PROFESSIONAL. The determination of the ADULT MENTAL HEALTH CARE CLUSTER CODE may or may not have involved the use of the National Tariff Payment System clustering algorithm.
Start date (care cluster assignment period)	The date on which the assignment of a patient to a Care Cluster started.
End date (care cluster assignment period)	The date on which the assignment of a patient to a Care Cluster ended.

Activity Information – Mental health care contacts

Field Name	Description
Personal and Demographic Details	
Organisation identifier (Code of provider)	Organisation identifier (Code of provider) is the Organisation identifier of the organisation acting as a health care provider.
Care Activity Details	
Service request identifier	The unique identifier for a SERVICE REQUEST for the Health Care Provider.

Care contact identifier	The CARE CONTACT IDENTIFIER is used to uniquely identify the CARE CONTACT within the Health Care Provider.
Care contact date	The date on which a Care Contact took place, or, if cancelled, was scheduled to take place.
Attended or did not attend code	An indication of whether an APPOINTMENT for a CARE CONTACT took place.
Currency Details	
Patient cluster assessment status	Field to indicate whether the patient has either been assigned an ADULT MENTAL HEALTH CLUSTER CODE that is still within its assessment period, was assessed but not accepted into service, has not been assessed or clustered or the patients treatment is not a clustered mental health service.
Adult mental health care cluster code	The allocation of the ADULT MENTAL HEALTH CARE CLUSTER CODE by the CARE PROFESSIONAL. The determination of the ADULT MENTAL HEALTH CARE CLUSTER CODE may or may not have involved the use of the National Tariff Payment System clustering algorithm.

Costing information

Field Name	Description
Patient level costing collection activity identifier	Unique identifier to report activities, which are measurable amount of work performed using resources to deliver elements of patient care. Patient activity can be recorded and reported through various feeder systems.
Patient level costing collection activity count	The number or duration of activities undertaken, eg number of tests or duration in theatre
Patient level costing collection resource identifier	Unique identifier to report resources, which are components used to deliver activities, such as staffing, supplies, systems and facilities.
Patient level costing collection total cost	The unit cost for each resource and activity combination reported in the service, patient facing and support costs should be reported separately.

Activity to be submitted

The collection year begins on 1 April 2019 and ends on 31 March 2020. All hospital provider spells completed within the collection year, or hospital provider spells still open at the end of the collection year, are in scope of this collection. All mental health care contacts completed within the collection year, are in scope of this collection. Figure 1 shows which part of a spell should be costed in the collection year.

Figure 1 incomplete hospital provider spells

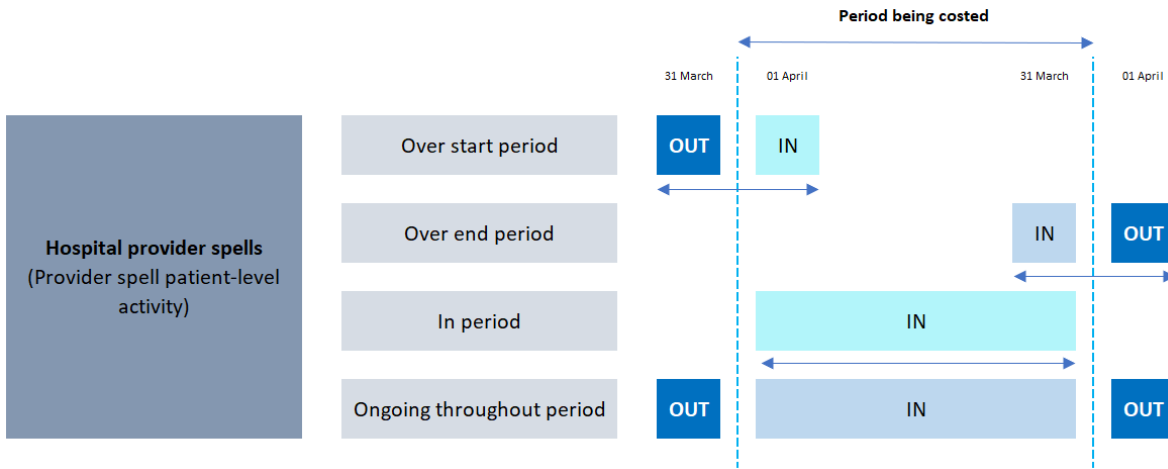
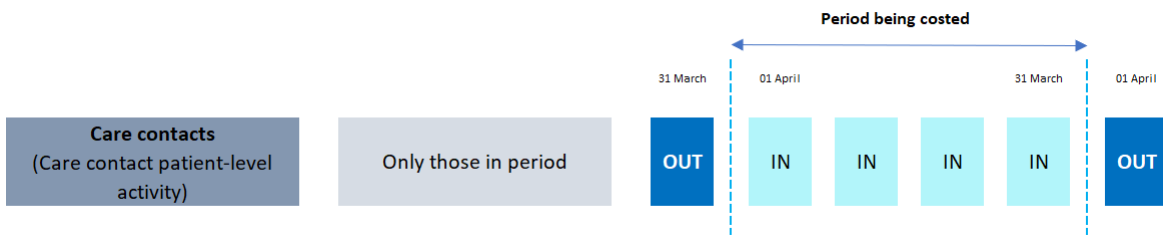


Figure 2 scope of care contacts collected



Annex D: Mental Health PLICS provider trusts

NHS Code	Organisation Name
RVN	AVON AND WILTSHIRE MENTAL HEALTH PARTNERSHIP NHS TRUST
RRP	BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST
RWX	BERKSHIRE HEALTHCARE NHS FOUNDATION TRUST
RXT	BIRMINGHAM AND SOLIHULL MENTAL HEALTH NHS FOUNDATION TRUST
TAJ	BLACK COUNTRY HEALTHCARE NHS FOUNDATION TRUST
TAD	BRADFORD DISTRICT CARE NHS FOUNDATION TRUST
TAF	CAMDEN AND ISLINGTON NHS FOUNDATION TRUST
RV3	CENTRAL AND NORTH WEST LONDON NHS FOUNDATION TRUST
RXA	CHESHIRE AND WIRRAL PARTNERSHIP NHS FOUNDATION TRUST
RYG	COVENTRY AND WARWICKSHIRE PARTNERSHIP NHS TRUST
RX4	CUMBRIA, NORTHUMBERLAND, TYNE AND WEAR NHS FOUNDATION TRUST
RWV	DEVON PARTNERSHIP NHS TRUST
RDY	DORSET HEALTHCARE UNIVERSITY NHS FOUNDATION TRUST
RYK	DUDLEY INTEGRATED HEALTH AND CARE NHS TRUST
RWK	EAST LONDON NHS FOUNDATION TRUST
R1L	ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST
RTQ	GLOUCESTERSHIRE HEALTH AND CARE NHS FOUNDATION TRUST
RXV	GREATER MANCHESTER MENTAL HEALTH NHS FOUNDATION TRUST
RWR	HERTFORDSHIRE PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST
RV9	HUMBER TEACHING NHS FOUNDATION TRUST
RXY	KENT AND MEDWAY NHS AND SOCIAL CARE PARTNERSHIP TRUST
RW5	LANCASHIRE & SOUTH CUMBRIA NHS FOUNDATION TRUST
RGD	LEEDS AND YORK PARTNERSHIP NHS FOUNDATION TRUST
RT5	LEICESTERSHIRE PARTNERSHIP NHS TRUST
RP7	LINCOLNSHIRE PARTNERSHIP NHS FOUNDATION TRUST
RW4	MERSEY CARE NHS FOUNDATION TRUST
RMY	NORFOLK AND SUFFOLK NHS FOUNDATION TRUST
RAT	NORTH EAST LONDON NHS FOUNDATION TRUST
RLY	NORTH STAFFORDSHIRE COMBINED HEALTHCARE NHS TRUST
RTV	NORTH WEST BOROUGHES HEALTHCARE NHS FOUNDATION TRUST
RHA	NOTTINGHAMSHIRE HEALTHCARE NHS FOUNDATION TRUST
RNU	OXFORD HEALTH NHS FOUNDATION TRUST
RPG	OXLEAS NHS FOUNDATION TRUST
RRE	MIDLANDS PARTNERSHIP NHS FOUNDATION TRUST
RT2	PENNINE CARE NHS FOUNDATION TRUST
RXE	ROTHERHAM DONCASTER AND SOUTH HUMBER NHS FOUNDATION TRUST
TAH	SHEFFIELD HEALTH & SOCIAL CARE NHS FOUNDATION TRUST

RV5	SOUTH LONDON AND MAUDSLEY NHS FOUNDATION TRUST
RQY	SOUTH WEST LONDON AND ST GEORGE'S MENTAL HEALTH NHS TRUST
RXG	SOUTH WEST YORKSHIRE PARTNERSHIP NHS FOUNDATION TRUST
RW1	SOUTHERN HEALTH NHS FOUNDATION TRUST
RXX	SURREY AND BORDERS PARTNERSHIP NHS FOUNDATION TRUST
RX2	SUSSEX PARTNERSHIP NHS FOUNDATION TRUST
RNK	TAVISTOCK AND PORTMAN NHS FOUNDATION TRUST
RX3	TEES, ESK AND WEAR VALLEYS NHS FOUNDATION TRUST
RKL	WEST LONDON NHS TRUST

Annex E – Data to be collected from IAPT providers

Costing Transformation Programme Data Extract Requirements

NHS Digital is being asked to collect information on four levels, which collectively form the extract requested by NHS England and NHS Improvement:

- The message header
- Reconciliation tables
- The activity records
- The activity cost records

Message Header (Reconciliation)

Field Name	Description
Organisation identifier (Code of submitting organisation)	Organisation identifier (Code of submitting organisation) is the organisation identifier of the organisation acting as the physical sender of a data set submission.
Financial year	The financial reporting period
Reporting period start date	The start of the reporting period the extract covers
Reporting period end date	The end of the reporting period the extract covers
Date and time data set created	The date and time the extract was created.
Patient level costing care activity type code	The data set the extract covers.

Message Header (Activity)

Field Name	Description
Organisation identifier (Code of submitting organisation)	Organisation identifier (Code of submitting organisation) is the organisation identifier of the organisation acting as the physical sender of a data set submission.
Financial year	The financial reporting period
Reporting period start date	The start of the reporting period the extract covers
Reporting period end date	The end of the reporting period the extract covers
Date and time data set created	The date and time the extract was created.

Patient level costing care activity type code	The data set the extract covers.
Patient level costing submission record count	The total number of activity records included in the monthly extract.
Patient level costing care monthly extract total cost	The total sum of the costs within the monthly extract.

Reconciliation tables

Final audited accounts table

Field Name	Description
Final audit accounts ID	Identifier which describes the financial transactions charged to the statement of comprehensive income.
Cost or income value	Financial transaction value.

Service and cost exclusions

Field Name	Description
Service ID	Identifier to report services and costs excluded from the data set.
Total cost	The total cost on a full absorption basis, which should be sum of patient facing and support costs for all resources and activities reported in the service and cost exclusions.

Activity Information – IAPT attendances

Field Name	Description
Personal and Demographic Details	
Organisation identifier (Code of provider)	Organisation identifier (Code of provider) is the Organisation identifier of the organisation acting as a health care provider.
NHS number	The primary identifier of a person within the NHS in England and Wales.
NHS number status indicator code	Codes in this field indicate whether the patients' NHS number is present, and if it is verified. If the NHS number is absent, the indicator gives the reason why.
Postcode of usual address	The POSTCODE of the ADDRESS nominated by the PATIENT with ADDRESS ASSOCIATION TYPE 'Main Permanent Residence' or 'Other Permanent Residence'
Person birth date	The date on which a PERSON was born or is officially deemed to have been born
Person stated gender code	Person stated gender code is self declared or inferred by observation for those unable to declare their person stated gender.

Care Activity Details	
Local patient identifier (Extended)	A identifier used to identify a PATIENT uniquely within a Health Care Provider
Service request identifier	The unique identifier for a SERVICE REQUEST for the Health Care Provider.
Appointment date	The date of an APPOINTMENT. In the case of a PATIENT attending an Out-Patient Clinic without prior notice or APPOINTMENT, the PATIENT will be given an Out-Patient Appointment.
Appointment time	The time of an APPOINTMENT. In the case of a PATIENT attending an Out-Patient Clinic without prior notice or APPOINTMENT, the PATIENT will be given an Out-Patient Appointment.
Attended or did not attend code	An indication of whether an APPOINTMENT for a CARE CONTACT took place.
Currency Details	
Patient cluster assessment status	Field to indicate whether the patient has either been assigned an ADULT MENTAL HEALTH CLUSTER CODE that is still within its assessment period, was assessed but not accepted into service, has not been assessed or clustered or is not a clustered mental health service.
Adult mental health care cluster code	The allocation of the ADULT MENTAL HEALTH CARE CLUSTER CODE by the CARE PROFESSIONAL. The determination of the ADULT MENTAL HEALTH CARE CLUSTER CODE may or may not have involved the use of the National Tariff Payment System clustering algorithm

Costing information

Field Name	Description
Patient level costing collection activity identifier	Unique identifier to report activities, which are measurable amount of work performed using resources to deliver elements of patient care. Patient activity can be recorded and reported through various feeder systems.
Patient level costing collection activity count	The number or duration of activities undertaken, eg number of tests or duration in theatre
Patient level costing collection resource identifier	Unique identifier to report resources, which are components used to deliver activities, such as staffing, supplies, systems and facilities.
Patient level costing collection total cost	The unit cost for each resource and activity combination reported in the service, patient facing and support costs should be reported separately.

Activity to be submitted

The collection year begins on 1 April 2019 and ends on 31 March 2020. All attended IAPT appointments within the collection year are in scope of this collection. Data for Long Term Care/IAPT integrated services pilots and Employment Advisor pilots is not in scope.

Annex F: IAPT PLICS provider trusts

NHS Code	Organisation Name
RVN	AVON AND WILTSHIRE MENTAL HEALTH PARTNERSHIP NHS TRUST
RRP	BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST
RWX	BERKSHIRE HEALTHCARE NHS FOUNDATION TRUST
RXT	BIRMINGHAM AND SOLIHULL MENTAL HEALTH NHS FOUNDATION TRUST
TAJ	BLACK COUNTRY HEALTHCARE NHS FOUNDATION TRUST
TAD	BRADFORD DISTRICT CARE NHS FOUNDATION TRUST
TAF	CAMDEN AND ISLINGTON NHS FOUNDATION TRUST
RV3	CENTRAL AND NORTH WEST LONDON NHS FOUNDATION TRUST
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RYG	COVENTRY AND WARWICKSHIRE PARTNERSHIP NHS TRUST
RX4	CUMBRIA, NORTHUMBERLAND, TYNE AND WEAR NHS FOUNDATION TRUST
RWV	DEVON PARTNERSHIP NHS TRUST
RDY	DORSET HEALTHCARE UNIVERSITY NHS FOUNDATION TRUST
RYK	DUDLEY INTEGRATED HEALTH AND CARE NHS TRUST
RWK	EAST LONDON NHS FOUNDATION TRUST
R1L	ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST
RTQ	GLOUCESTERSHIRE HEALTH AND CARE NHS FOUNDATION TRUST
RXV	GREATER MANCHESTER MENTAL HEALTH NHS FOUNDATION TRUST
RWR	HERTFORDSHIRE PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST
RV9	HUMBER TEACHING NHS FOUNDATION TRUST
RXY	KENT AND MEDWAY NHS AND SOCIAL CARE PARTNERSHIP TRUST
RW5	LANCASHIRE & SOUTH CUMBRIA NHS FOUNDATION TRUST
RGD	LEEDS AND YORK PARTNERSHIP NHS FOUNDATION TRUST
RT5	LEICESTERSHIRE PARTNERSHIP NHS TRUST
RP7	LINCOLNSHIRE PARTNERSHIP NHS FOUNDATION TRUST
RW4	MERSEY CARE NHS FOUNDATION TRUST
RMY	NORFOLK AND SUFFOLK NHS FOUNDATION TRUST
RAT	NORTH EAST LONDON NHS FOUNDATION TRUST
RLY	NORTH STAFFORDSHIRE COMBINED HEALTHCARE NHS TRUST
RTV	NORTH WEST BOROUGHES HEALTHCARE NHS FOUNDATION TRUST
RHA	NOTTINGHAMSHIRE HEALTHCARE NHS FOUNDATION TRUST
RNU	OXFORD HEALTH NHS FOUNDATION TRUST
RPG	OXLEAS NHS FOUNDATION TRUST
RRE	MIDLANDS PARTNERSHIP NHS FOUNDATION TRUST
RT2	PENNINE CARE NHS FOUNDATION TRUST
RXE	ROTHERHAM DONCASTER AND SOUTH HUMBER NHS FOUNDATION TRUST

TAH	SHEFFIELD HEALTH & SOCIAL CARE NHS FOUNDATION TRUST
RV5	SOUTH LONDON AND MAUDSLEY NHS FOUNDATION TRUST
RQY	SOUTH WEST LONDON AND ST GEORGE'S MENTAL HEALTH NHS TRUST
RXG	SOUTH WEST YORKSHIRE PARTNERSHIP NHS FOUNDATION TRUST
RW1	SOUTHERN HEALTH NHS FOUNDATION TRUST
RXX	SURREY AND BORDERS PARTNERSHIP NHS FOUNDATION TRUST
RX2	SUSSEX PARTNERSHIP NHS FOUNDATION TRUST
RNK	TAVISTOCK AND PORTMAN NHS FOUNDATION TRUST
RX3	TEES, ESK AND WEAR VALLEYS NHS FOUNDATION TRUST
RKL	WEST LONDON NHS TRUST