

Diagnostic Imaging Data Set (DIDS) v2.0

Webinar 1

Date: 17/05/2024

Time: 10:00 am – 12:00 pm

Presented by:

Chris Turner: Data Design Service, NHSE

Housekeeping

Welcome and thank you for joining this webinar, the session will begin shortly.

Please note the following housekeeping points:



- Please remain on mute throughout the webinar, unless indicated, to avoid disruption and noise interference for other attendees
- If you wish to ask a question, raise a query or help us understand better the possible solution to a requirement during the webinar, you may do so via the meeting chat function, or by using the “raise your hand” function, all contributions are welcome!



- To view the meeting chat, please select the ‘Show conversation’ icon in the Teams control task bar (pictured left)
- If we are unable to answer your question due to time constraints, please forward it to dataset.development@nhs.net and we will pick it up via our mailbox
- This webinar will be recorded and published. The recording will help us to update and publish the slide pack covering the questions and answers raised and allow people unable to make the webinar the chance to get involved.

Start recording



Consultation Approach

This is one of two webinars which is relevant to all providers, suppliers and services that are or may be in scope to submit the Diagnostic Imaging Data Set.

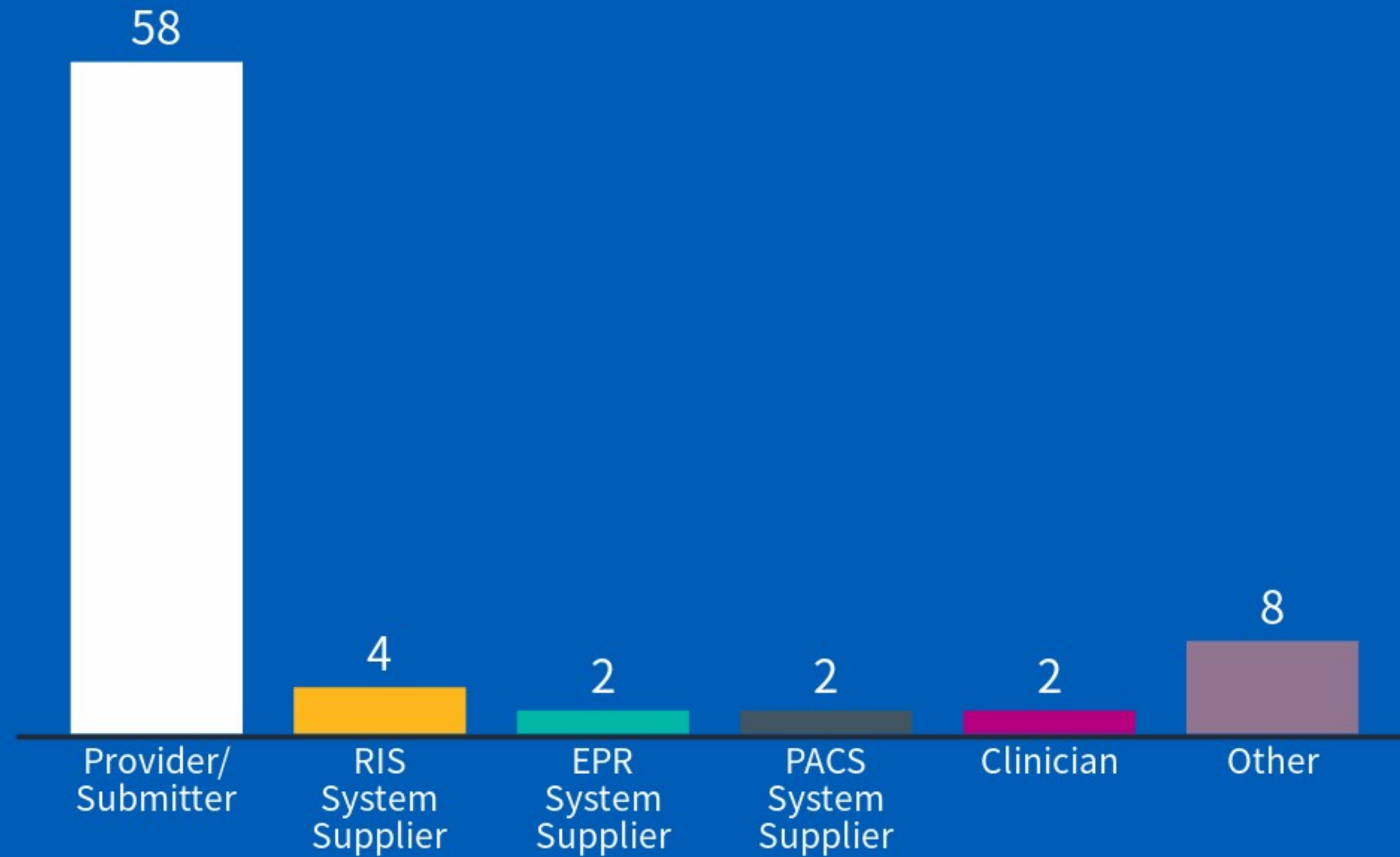
The target audience for this webinar is recommended for:

- All providers / submitters
- IT system suppliers

The focus of this webinar will be primarily to discuss requirements that have already been through the Expert Reference Group.

Webinar 2 **Friday 14 June 2024, 10:00 am – 12:00 pm** will be dealing with the remaining requirements

What is your role in the context of the DIDS?



Agenda

1. Welcome and Introductions
2. Consultation Approach & Development Overview
3. DIDS v2.0 Introduction
4. Requirements
5. Technical Output Specification & Relational Structure
6. Resources
7. Questions

[Diagnostic Imaging Data Set \(DIDS\) - Submission Process User Survey - NHS England - Citizen Space](#)

DIDS v2.0 – Development Overview

Overview

- Data Alliance Partnership Board (DAPB) process started in January 2024
- DAPB meet in September 2024
- ISN due to be published October 2024
- Activity collected from 1st April 2025
- Data submitted post 1st April 2025 (likely 1st May 2025)

Development Process

Requirements gathering - Completed:

- 30 requirements logged
 - NHSE
 - Data Dictionary
 - Providers & IT Suppliers

Requirements Elaboration - Ongoing:

- Engagement with NHSE, NHS Data Model & Dictionary, Terminology teams and all stakeholders
- Second consultation webinars on 14/06/2024
- Online Public Consultation (w/ draft specification) to follow w/c **17/06/2024**

DIDS v2.0 - Introduction

DIDS is now a Data Set Development Service (DSDS) data set, which sits inside the wider Data Design Service (DDS) team.

Things have changed since DIDS v1.0!

- Scope
- Submission method
- Structure
- Data storage method
- Validation process
- Focus
- Requirements



DIDS v2.0 – Requirements List 1

The Requirements List is published here: [Diagnostic Imaging Data Set \(DID\) data product - NHS England Digital](#)

Guidance

- DIDS009 - Publish numbers of interventional procedures
- DIDS018 - Paramedic guidance
- DIDS019 - Guidance GP scenario

Duplicates

- DIDS016 - Clinical Outcome Text same as DIDS013
- DIDS027 - Submission window repeat same as DIDS022

DIDS v2.0 – Requirements List 2

The Requirements List is published here: [Diagnostic Imaging Data Set \(DID\) data product - NHS England Digital](#)

Future Uplift

- DIDS001 - Recording DNAs
- DIDS012 - Radiation dose

Satisfied by other requirements

- DIDS006 - Measuring complexity

DIDS v2.0 – Requirements List 3

The Requirements List is published here: [Diagnostic Imaging Data Set \(DID\) data product - NHS England Digital](#)

- DIDS002 - Current dates to Timestamps
- DIDS003 - Additional Timestamps
- DIDS004 - Urgency of the request
- DIDS005 - Improve understanding of waiting times
- DIDS010 & DIDS014 - Cancer flag / Other RCR codes
- DIDS011 - Auto report indicator
- DIDS015 - Data Dictionary Changes
- DIDS020 - NICIP Codes
- DIDS023 - ETOS creation
- DIDS025 & DIDS007 - Relational structure / Capture every scan

Guidance Requirements

DIDS009 - Publish numbers of interventional procedures

It would be adequate to ensure that the guidance for DIDS v2 clarifies that interventional procedures should be included

DIDS018 - Paramedic guidance

A common data item used across data sets. Paramedics fall into the: REFERRER OTHER THAN GENERAL PRACTITIONER, GENERAL DENTAL PRACTITIONER or CONSULTANT.

DIDS019 - GP scenario

- A GP wishes to refer a patient for imaging
- The GP wishes to give the patient choice so refers the patient for the same imaging at multiple providers
- The patient is seen somewhere, but neither the GP nor the patient can contact the other providers to cancel
- The other providers therefore suffer DNAs in slots that could have been offered to other patients



DIDS002 – Current dates to include times

Current dates to be timestamps, to allow more granular / accurate reporting. Timestamps measures in minutes:

DIDS v1.0	DIDS v2.0
DIAGNOSTIC TEST REQUEST DATE	DIAGNOSTIC TEST REQUEST DATE DIAGNOSTIC TEST REQUEST TIME
DIAGNOSTIC TEST REQUEST RECEIVED DATE	DIAGNOSTIC TEST REQUEST RECEIVED DATE DIAGNOSTIC TEST REQUEST RECEIVED TIME
SERVICE REPORT ISSUE DATE	SERVICE REPORT ISSUE DATE SERVICE REPORT ISSUE TIME
DIAGNOSTIC TEST DATE	CODED PROCEDURE START TIMESTAMP CODED PROCEDURE END TIMESTAMP

Another option is to have a single date/time data item. However, if time isn't recorded separately and is in one, if it's not recorded it defaults to midnight, so analysis may not work as it would appear certain events happen before others possibly could.

A driver for this change (and DIDS003 on the next slide) is [NHS England » Diagnostic imaging reporting turnaround times](#).



DIDS003 – Additional timestamps

Additional timestamps to allow separation of:

- 1) waiting list and planned
- 2) acquisition and reporting

- 1) DIDS005 covers this with a new national code list
- 2) CODED PROCEDURE START TIMESTAMP - SERVICE REPORT ISSUE DATE & SERVICE REPORT ISSUE TIME provides the time taken

DIDS004 – Capture urgency of the request

Capture urgency of request to allow analysis of turnaround times in the context of (request) urgency

1	Routine
2	Urgent
3	2 week wait



DIDS005 – Improve understanding of waiting times

To allow the distinguishing of waiting list and planned waits.

REFERRAL TYPE:

- 01 - Waiting list
- 02 - Planned
- 03 - Unscheduled
- 04 - Therapeutic
- 05 - Screening

DIDS010 & DIDS014 – Cancer flag / Other RCR codes

Alert flag to identify if the imaging showed a suspected or confirmed cancer, recurrence or progression. Also, the inclusion of RCR codes for significant unexpected findings.

[Recommendations on alerts and notification of imaging reports | The Royal College of Radiologists \(rcr.ac.uk\)](https://www.rcr.ac.uk/recommendations-on-alerts-and-notification-of-imaging-reports)

[Alerts notification imaging reports recommendations 1022.pdf \(aomrc.org.uk\)](https://www.aomrc.org.uk/alerts-notification-imaging-reports-recommendations-1022.pdf) – approx. 40 conditions

01	Confirmation / Suspicion of a primary cancer
02	Confirmation / Suspicion of a recurrence of a cancer
03	Confirmation / Suspicion of a progression of a cancer
04	Other unexpected finding
99	Not applicable

DIDS011 – Auto Report indicator

Auto-reports are reports generated by the RIS system using predefined text, indicating that interpretation of the images produced has not and will not be carried out by the imaging service unless specifically requested i.e. interpretation of the images, and recording the findings is the responsibility of the requester.

Improve accuracy of data regarding reporting turnaround times by identifying which reports constitute auto-reports.

Y	Yes – the report was auto generated
N	No – the report was NOT auto generated

DIDS015 – Data Dictionary Maintenance

Any amendments to existing NHS DMD items and or descriptions, and addition of new data items e.g Person Stated Gender Code:

DIDS v1.0	DIDS v2.0
PERSON GENDER CODE CURRENT	PERSON STATED GENDER CODE
GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	GENERAL MEDICAL PRACTICE (PATIENT REGISTRATION)
REFERRING ORGANISATION CODE	ORGANISATION IDENTIFIER (REFERRING ORGANISATION)
IMAGING CODE (SNOMED-CT)	CODED PROCEDURE (CLINICAL TERMINOLOGY)
DIAGNOSTIC TEST DATE	CODED PROCEDURE START TIMESTAMP
SITE CODE (OF IMAGING)	ORGANISATION SITE IDENTIFIER (OF IMAGING)

ETHNIC CATEGORY 2021 added as the placeholder – awaiting publication of the Unified Information Standard for Protected Characteristics.

DIDS020 – NICIP Codes

Review of continued use of NICIP codes.

SNOMED is an alternative for NICIP, as per the SNOMED standard SCCI0034.

DIDS v2.0 will support both coding schemes but only one code per scan. However it can be a mixture throughout the submission.

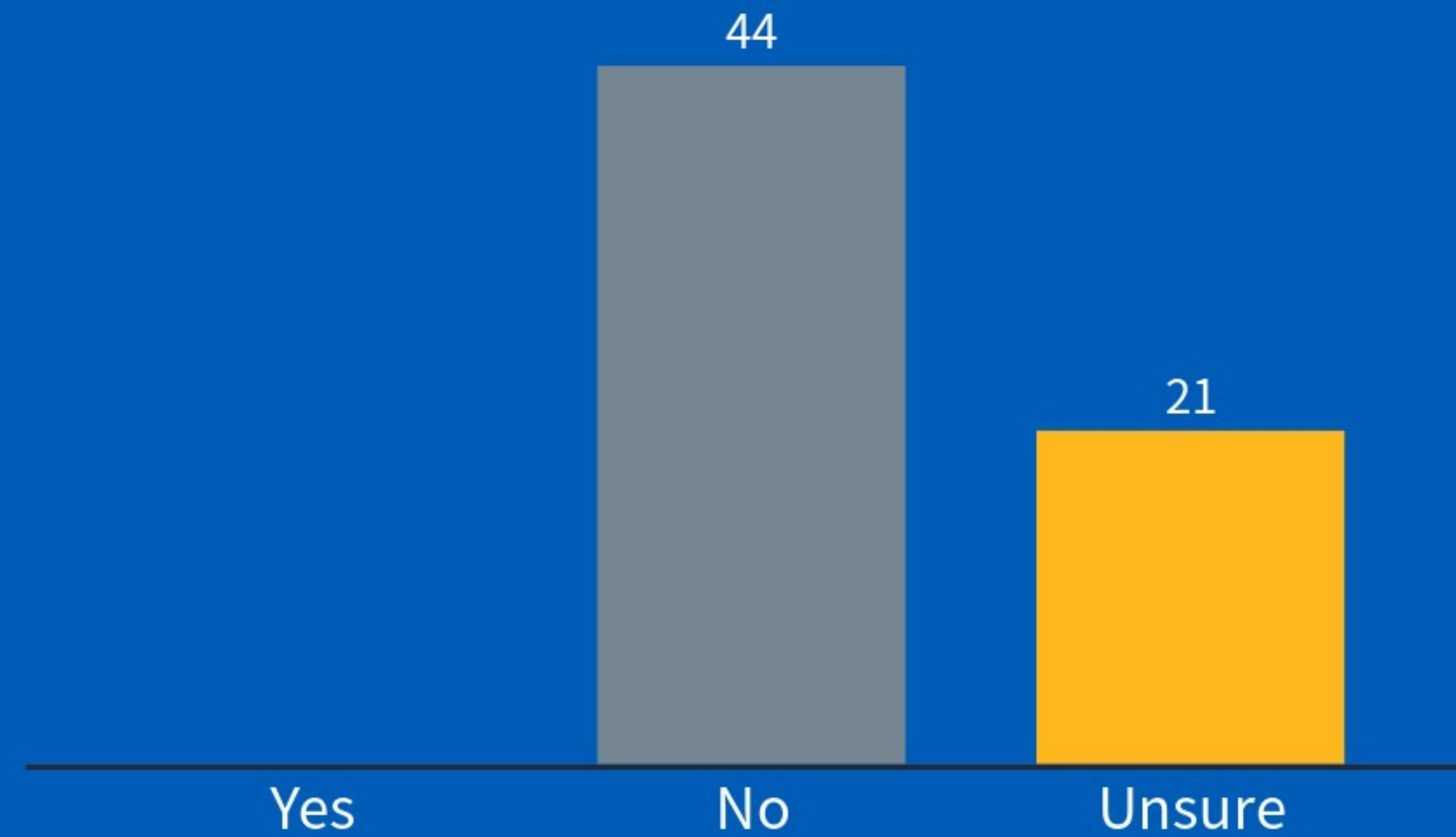
Any need for both to be sent in one record?

PROCEDURE SCHEME IN USE (IMAGING)

01	NICIP
02	SNOMED CT

CODED PROCEDURE (CLINICAL TERMINOLOGY) – the actual code

Is there a need to include both a NICP and SNOMED CT code together in one record?



If yes, why?

DIDS023 – Enhanced Technical Output Specification (ETOS) creation

TOS = Technical Output Specification - part of the ISN

ETOS = Enhanced Technical Output Specification – including further information

DATA GROUP: DIDS001 - MASTER PATIENT INDEX

DATA GROUP DESCRIPTION: To carry personal details of the patient.

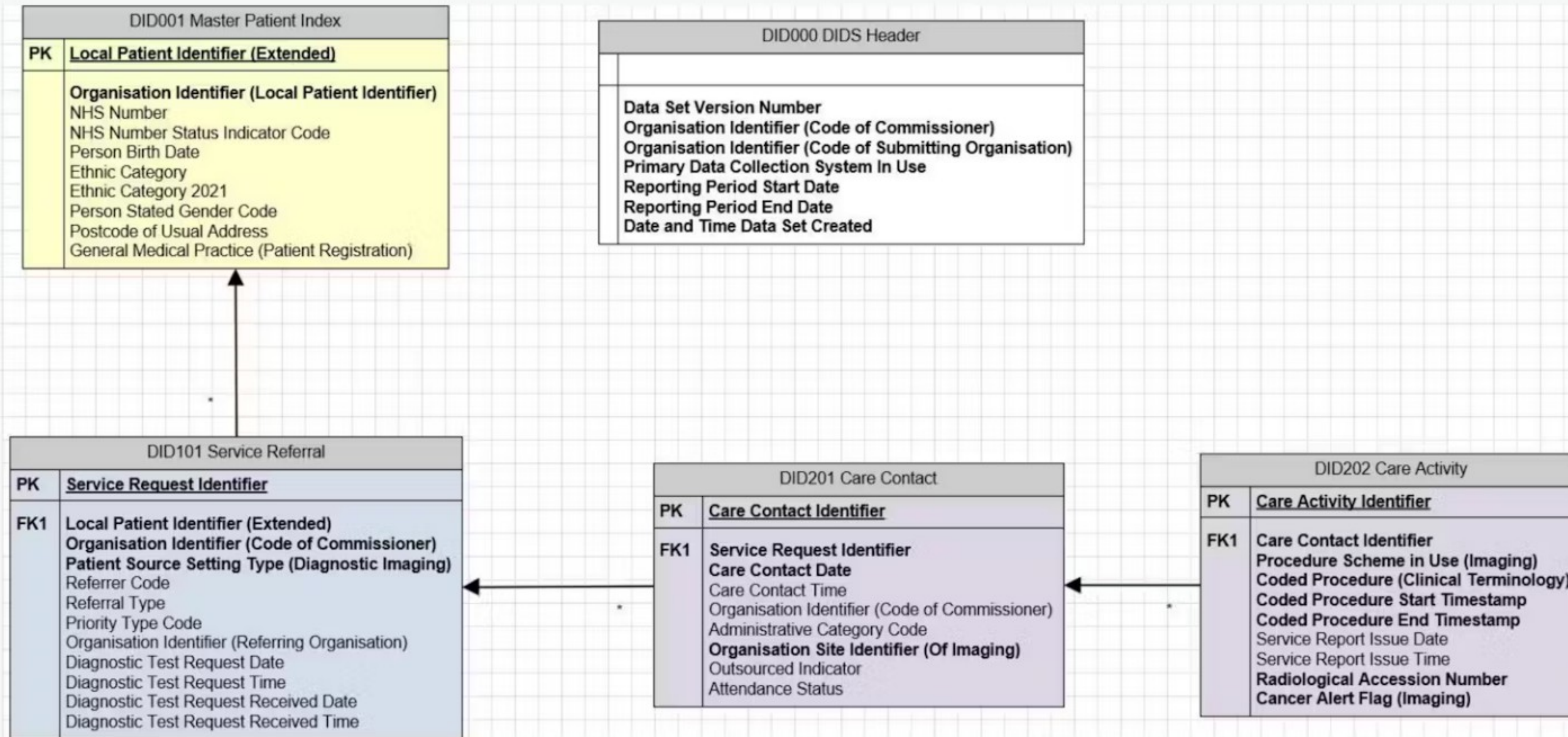
One occurrence of this group is required for each patient.
At least one of these data items must be present.

DATA GROUP STATUS: M

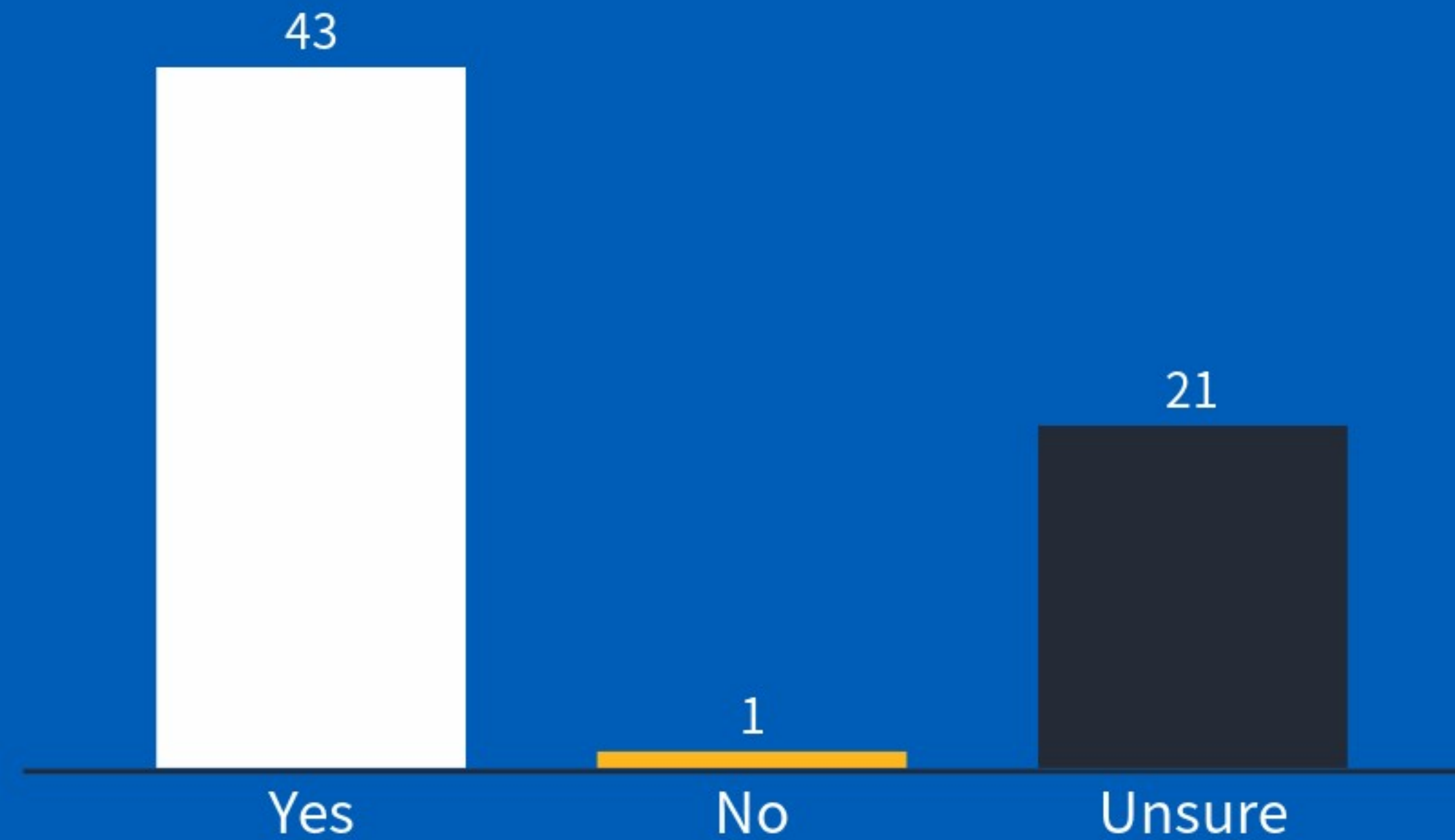
DATA ITEM UID	DATA ITEM SUBMISSION / ASSET NAME	DATA ITEM NAME	DATA ITEM DEFINITION	DATA ITEM STATUS	DATA ITEM FORMAT	NATIONAL CODE	NATIONAL CODE DEFINITION
DIDS001001	LocalPatientIdentifier_Extended	LOCAL PATIENT IDENTIFIER (EXTENDED)	LOCAL PATIENT IDENTIFIER (EXTENDED) is used where IT systems have a LOCAL PATIENT IDENTIFIER which is longer than 10 characters and LOCAL PATIENT IDENTIFIER cannot be used for data submission.	M	max an20	n/a	n/a
DIDS001002	OrganisationIdentifier_LocalPatientIdentifier	ORGANISATION IDENTIFIER (LOCAL PATIENT IDENTIFIER)	ORGANISATION IDENTIFIER (LOCAL PATIENT IDENTIFIER) is the ORGANISATION IDENTIFIER of the ORGANISATION that assigned the LOCAL PATIENT IDENTIFIER.	M	min an3 max an5	n/a	n/a
DIDS001003	NHSNumber	NHS NUMBER	The NHS NUMBER, the primary identifier of a PERSON, is a unique identifier for a PATIENT within the NHS in England and Wales.	R	n10	n/a	n/a
DIDS001004	NHSNumberStatusIndicatorCode	NHS NUMBER STATUS INDICATOR CODE	The trace status of the NHS number.	R	an2	01	Number present and verified
						02	Number present but not traced
						03	Trace required
						04	Trace attempted - No match or multiple match found
						05	Trace needs to be resolved - (NHS Number or PATIENT detail conflict)
						06	Trace in progress
						07	Number not present and trace not required
						08	Trace postponed (baby under six weeks old)

DIDS025 & DIDS007 – Relational structure / Capture every scan

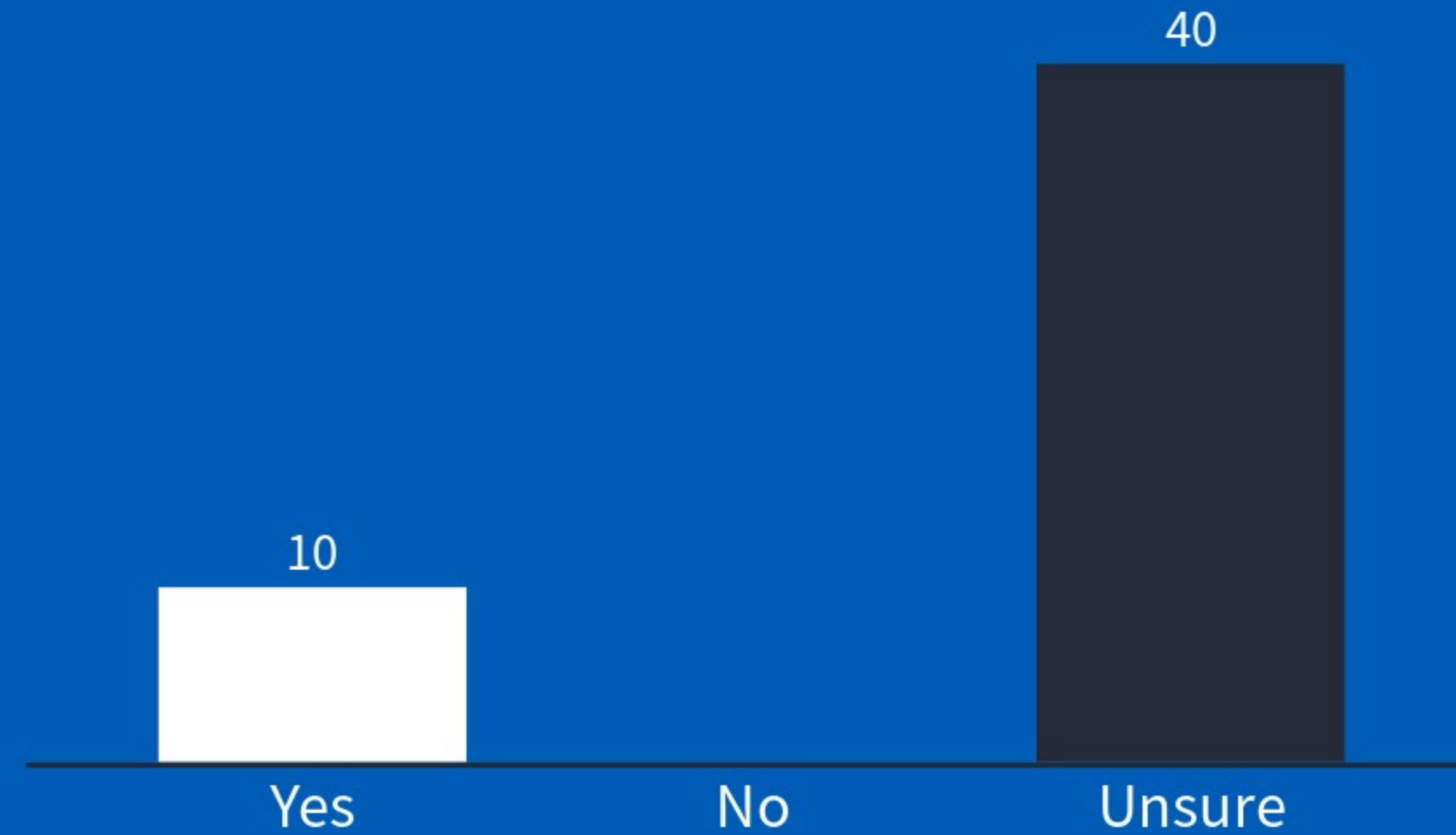
PK and FK1 are a must, RAN v Care Activity Identifier – has to be unique



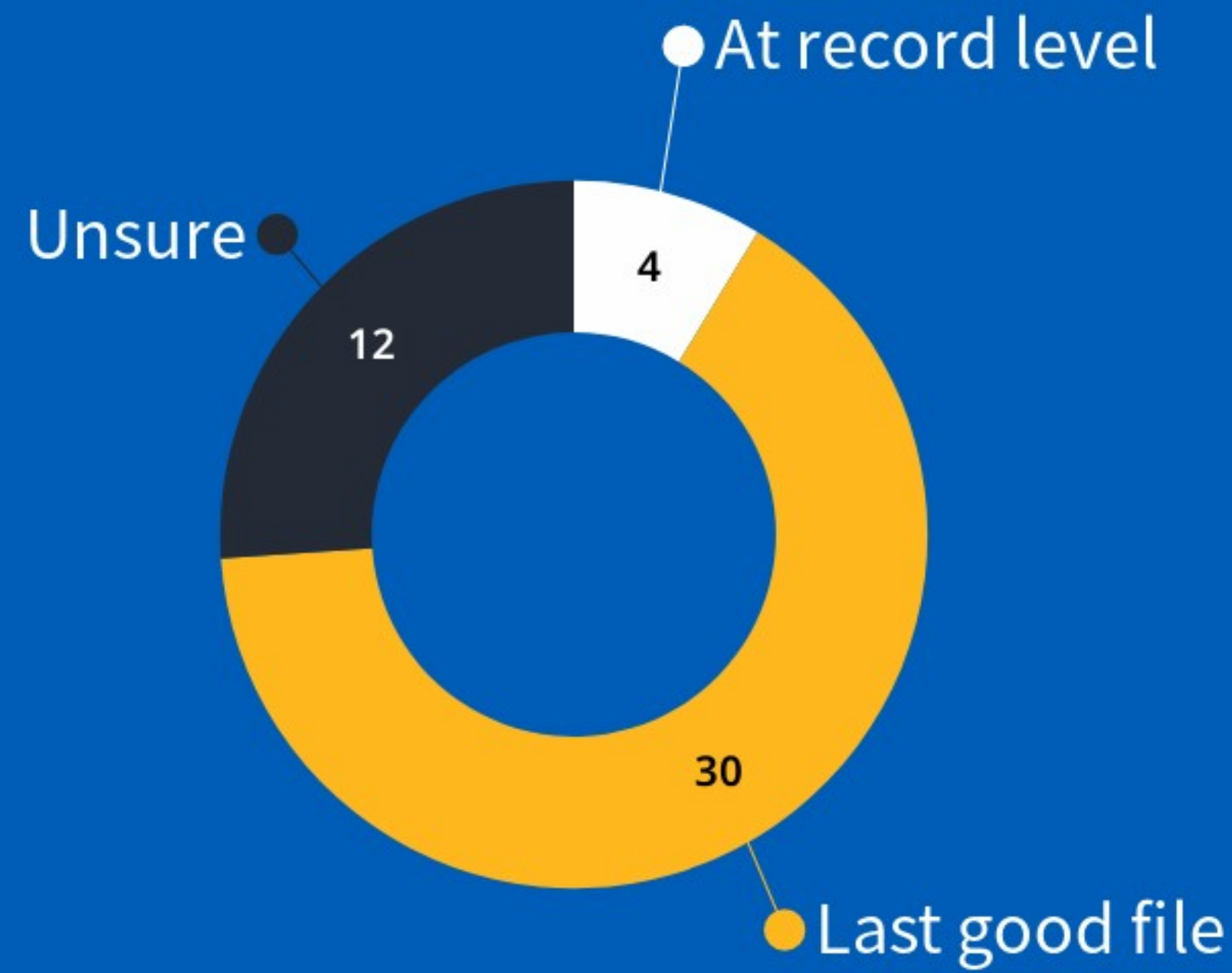
Is the Radiological Accession Number (RAN) always unique?



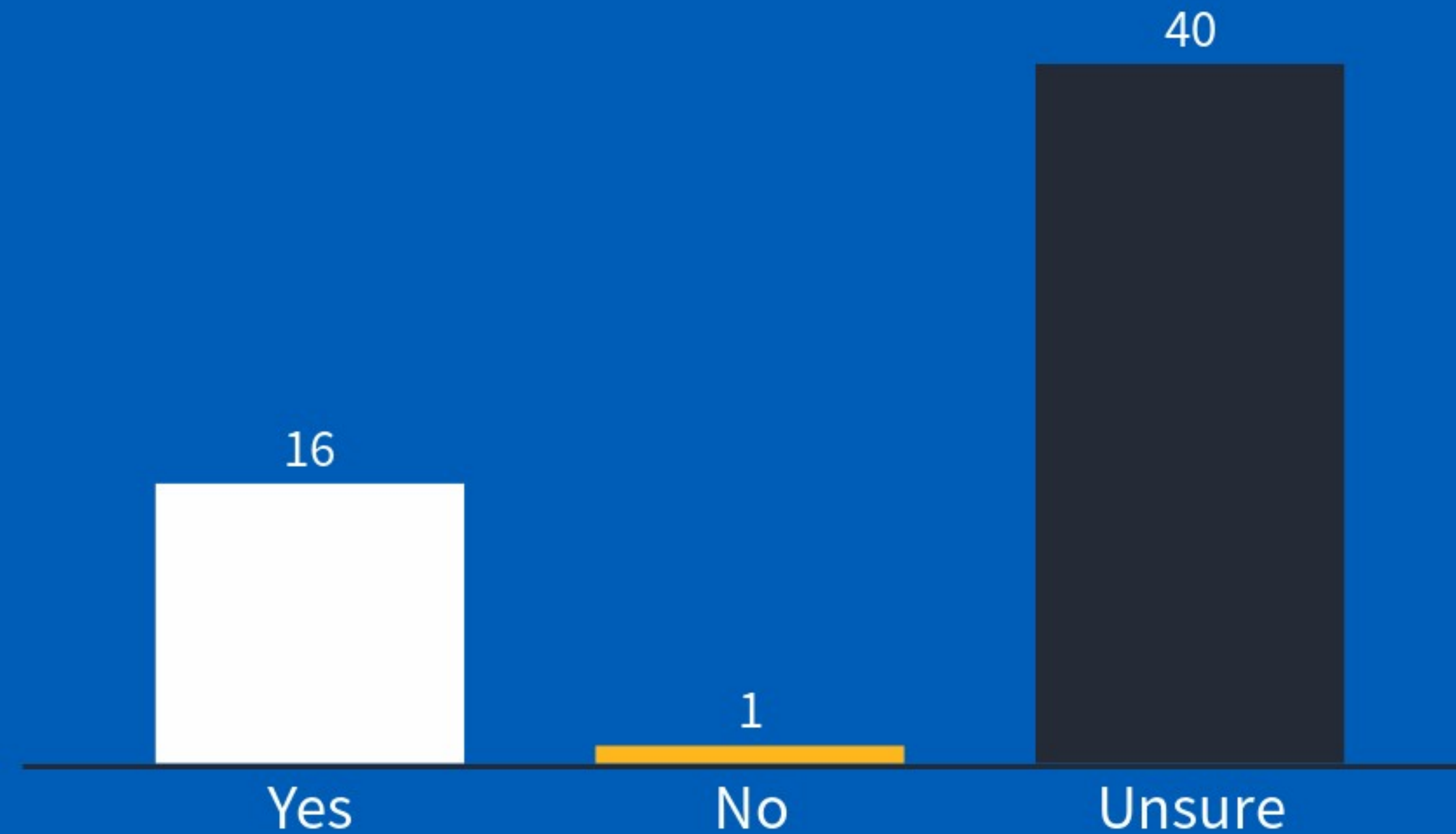
Can you populate and submit the PK and FK1 fields shown on the data model?



If you make an update to a submission, how is this done?



Do the requirements seem feasible for submission within the timescales stated?



If no, what are your concerns?

Unsure as Awaiting
understanding & detail
of scope



Other Requirements

- DIDS008 - Addition of main speciality / treatment function of the request code
- DIDS013 - Include the RIS text report (cancer or unexpected findings only)
- DIDS017 - Submission method - [Diagnostic Imaging Data Set \(DIDS\) - Submission Process User Survey - NHS England - Citizen Space](#)
- DIDS021 - Outsourcing indicator
- DIDS022 - Submission window
- DIDS024 - General anaesthetic indicator
- DIDS030 - Screening referrals

Scope Requirement



DIDS026, 028 & 029 - Potential scope changes / defining a patient / IT system list expansion

Currently in scope - All imaging activity relating to people who receive NHS funded imaging services for the purpose of diagnosis, intervention and/or treatment are within scope of the DID (with the exception of breast screening services, or any other diagnostic imaging tests not typically recorded on central RIS). The scope of the data set requires record level data submission from radiology departments' Radiology Information Systems (RIS) for all activity funded by the NHS.

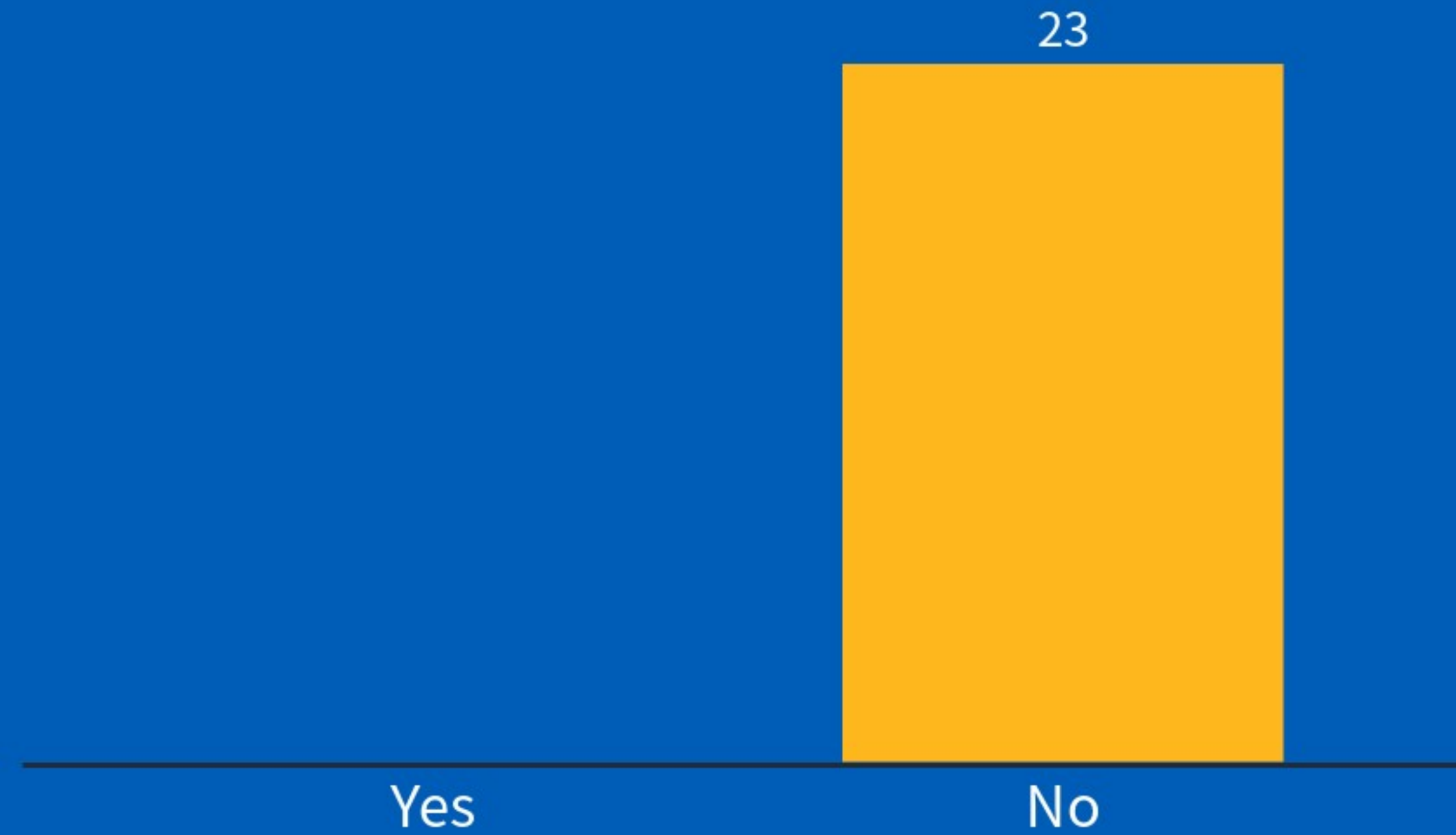
Currently out of scope:

- Imaging activity recorded in a provider's system that is separate to the RIS such as:
 - o Breast screening
 - o Mobile cardiac ultrasound activity
- Imaging activity performed on the deceased, such as that carried out for postmortem purposes.
- Primary care dental x-rays

Proposed new scope to include: "All NHS funded diagnostic imaging tests" for example screening programmes

IT expansion: "to acknowledge the existence of Digital Screening systems and Electronic Patient Records (EPRs)"

Do you have any concerns about the expansion of scope?



If yes, why?



Resources

- Technical Output Specification
- Enhanced Technical Output Specification
- User Guidance
- Data Model





Questions?



DIDS Webpage: <https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-sets/diagnostic-imaging-dataset-did-data-product>



Get in touch: dataset.development@nhs.net

Thank You



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