

DAPB0084: OPCS-4.11 Requirements Specification

November 2025



Data Alliance Partnership Board

The Data Alliance Partnership Board (DAPB), which holds delegated authority from the Secretary of State for Health and Social Care, has approved a change to an existing information standard for publication under [section 250 of the Health and Social Care Act 2012](#).

Assurance that this information standard meets the requirements of the Act and is appropriate for the use specified in the specification document has been provided by the Data Governance, Assurance and Testing (DGAT) team and endorsed by the Data Assurance Board (DAB).

This information standard comprises the following documents:

- Change Specification
- Implementation Guidance
- Requirements Specification (this document)

An Information Standards Notice (DAPB0084 Amd 36/2025) has been issued as a notification of use and implementation timescales. Please read this alongside the documents for the standard.

The controlled copies of these documents can be found on the [NHS England website](#). Any copies held outside of that area, in whatever format (e.g. paper, email attachment), are considered to have passed out of control and should be checked for currency and validity.

Date of publication: 6 November 2025



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Glossary of Terms

Term / Abbreviation	What it stands for
CDS	Commissioning Data Sets
DAPB	Data Alliance Partnership Board
Delen	Terminology and Classifications Delivery Service's collaboration and sharing site
DHSC	Department of Health and Social Care
HRG	Healthcare Resource Groups
ICD-10	International Statistical Classification of Diseases and Related Health Problems - Tenth Revision
NHS Payment Scheme	A set of prices and rules to help local NHS providers and commissioners provide best value to their patients produced by NHS England.
NCO	National Casemix Office, part of NHS England
SUS	Secondary Uses Service
TRUD	Technology Reference data Update Distribution Service

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1. Overview

This document describes the standard and provides the requirements and conformance criteria to test that the product, system or service complies with the requirements to support the local implementation of the OPCS Classification of Interventions and Procedures, Version 4.11, also known as OPCS-4.11.

This update to the standard is a continuance of the regular review and uplift of OPCS-4 in line with the recommended best practice of keeping clinical classifications aligned with advances in health care.

2. Summary of the standard

This table below contains a summary of the information standard:

Standard	
DAPB unique identifier	DAPB0084 Amd 36/2025
Title	OPCS Classification of Interventions and Procedures Version 4.11
Description	<p>The OPCS-4 Classification of Interventions and Procedures (OPCS-4) is an NHS fundamental information standard published under section 250 of the Health and Social Care Act 2012 (Ref DAPB0084). OPCS-4 is updated every 3 years to reflect current NHS clinical practice to support aggregate data for statistical purposes and reimbursement.</p> <p>OPCS-4 is a statistical classification for clinical coding of hospital interventions and procedures undertaken by the NHS. The classification is mandatory for use by healthcare providers to support various forms of data collections for secondary uses.</p> <p>The classification comprises a list of alphanumeric codes organised into mainly anatomically based chapters. It is available online using the NHS Classifications Browser.</p> <p>The Terminology and Classifications Delivery Service has responsibility for the support, maintenance, development, and licensing of the OPCS-4 which is governed by Crown Copyright.</p>
Applies to	<p>All Health Care Providers that are required to submit data on interventions and procedures for:</p> <ul style="list-style-type: none"> Admitted Patient Care Commissioning Data Sets (CDS)

	<ul style="list-style-type: none"> Other data collections as defined in the NHS Data Model and Dictionary. <p>Implementation of the change to this information standard impacts all health IT systems suppliers providing systems to the above providers; such providers should work with their suppliers to determine necessary changes.</p>
Release	
Release title	OPCS Classification of Interventions and Procedures Version 4.11 (OPCS-4.11)
Description	OPCS-4.10 is released by the NHS England Terminology and Classifications Delivery Service and contains updates submitted by the NHS, DHSC, NHS England and other organisations via the OPCS-4 Requests Portal.
Implementation Completion date	1 April 2026

2.1. Related documents

Ref #	Title
1	OPCS-4.11 Information Standards Notice
2	OPCS-4.11 NHS Data Model and Dictionary Change Request
3	Summary of Core Changes from OPCS-4.10 to OPCS-4.11
4	OPCS-4.11 Implementation guidance
5	OPCS-4.11 Change Specification

2.2. Supporting information

Ref #	Title
1	OPCS-4.11 Metadata File with associated Technical Specification
2	National Clinical Coding Standards OPCS-4.11

2.3. Related Standards

Ref #	Reference	Title
1	SCCI0021	ICD-10 5th Edition
2	SCCI0034	SNOMED CT
3	DCB0160	Clinical Risk Management: its Application in the Deployment and Use of Health IT Systems
4	DCB0129	Clinical Risk Management: its Application in the Manufacture of Health IT Systems

3. Background

The OPCS-4 is a classification of surgical procedures and interventions. OPCS-4, along with ICD-10, is the UK standard for the coding of admitted patient care clinical data and, taken together, their use is fundamental to the production of statistical data by the four national administrations in England, Wales, Scotland and Northern Ireland.

This fundamental NHS Information Standard is maintained and published by the Terminology and Classifications Delivery Service.

OPCS-4 enables interventions and surgical procedures performed on patients to be coded consistently for use in analyses. When OPCS-4 codes are linked to other data items, such as procedure date, commissioner and provider of health care services, diagnoses via ICD-10, consultant code and patient's postcode, they become a powerful tool for managing and improving the care of persons and populations. Listed below are just a few of the applications:

- National reporting requirements as specified in the NHS Data Model and Dictionary, for example the Admitted Patient Care Commissioning Data Set (CDS)
- Clinical Governance: Clinical audit, risk analysis, mortality data (SHMI)
- Quality Improvement: Improving patient pathways, clinical research, treatment effectiveness
- Epidemiology: Health trends, etiological studies, clinical indicators, health security surveillance
- Benchmarking: Reducing variation, Model Hospital, GIRFT, NCIP
- Commissioning: Casemix planning, development of new services
- Financial flows: National tariff payments, cost analysis.
- Operational and strategic planning for health care delivery.

OPCS-4 is used by NHS suppliers to build/update software to support NHS business functions and interoperability.

4. Strategic fit and business justification

In England the OPCS-4 classification is an approved NHS Fundamental Information Standard for mandatory use by healthcare providers. The requirement to provide classification data for admitted patient care is mandatory and part of the NHS contracts.

4.1. NHS England National Casemix Office (NCO)

The NCO uses OPCS-4 (and ICD-10) in the design of Healthcare Resource Groups (HRGs). The [National Casemix Office Design Framework](#) 2022 shows that Classifications, and specifically OPCS-4, continues to be the backbone of HRGs.

However, OPCS-4 needs to continue to evolve so that HRGs can reflect:

- surgery that utilises new devices and innovative clinical approaches and procedures
- multiple procedures undertaken at the same time
- more complex care.

4.2. NHS Payment Scheme

The NHS payment system for secondary healthcare is called the [NHS Payment Scheme](#). The Payment Scheme is a set of rules, prices and guidance that governs the payments made by commissioners to secondary healthcare providers for the provision of NHS services.

Integral to the Payment Scheme are the World Health Organization International Statistical Classification of Diseases and Related Health Problems, 10th Revision (ICD-10) for diagnoses and OPCS Classification of Interventions and Procedures (OPCS-4) for procedures. OPCS-4 and ICD-10 underpin the NHS Payment Scheme. Both classifications need to be kept up to date to reflect clinical practice and to satisfy the requirements articulated in government policy.

4.3. Other use cases

Some of the other initiatives that use OPCS-4 are outlined below:

- The Information Standard is used across the UK for submissions of aggregated information to national database collections for statistical and epidemiological analyses. OPCS-4 is a vital component of national datasets such as Hospital Episodes Statistics (HES) in England, Patient Episode Data for Wales (PEDW), Scottish Morbidity Records (SMR).
- The Information Standard is used by the Department of Health as part of the public scrutiny of NHS services.
- It is used to audit or assess NHS organisations on an ongoing basis by NHS England and the Care Quality Commission.

- It is used, with ICD-10, by the National Consultant Information Programme (NCIP) to produce data visualisations allowing consultants to review their clinical practice, helping improve patient safety and clinical quality and view locally and nationally benchmarked data covering activity and outcomes.

5. Details of the standard

OPCS-4 is used to classify hospital interventions and surgical procedures to support various data collection for operational and secondary uses. It permits the systematic analysis, interpretation, and comparison of interventions and procedures performed in the NHS.

It is mandatory for Admitted Patient Care Commissioning Data Sets (CDS).

OPCS-4 contains an exhaustive set of mutually exclusive categories to aggregate data for hospital interventions and surgical procedures. It provides a system for the ordering and hierarchical grouping of concepts for statistical purposes. The grouping of concepts is driven by a purpose for which the classification is designed. OPCS-4 has residual classes ('other specified and unspecified') to ensure that all cases can be classified; thus, they can accommodate new or unanticipated procedures and interventions. Classifications also include index-terms and rules that guide users to the required concept.

The classification comprises a list of alphanumeric codes within mainly anatomically based chapters, most of which relate to the whole or part of a body system. Each chapter is designated alphabetically e.g. Chapter A covers the nervous system and Chapter K is assigned to the heart. The alphabetic character for each chapter forms the prefix of the three-character category and four-character codes within it.

Capacity issues mean that the hierarchical body system structure is no longer enforceable, so strict use of the Alphabetical Index and Tabular List notes is imperative to ensure accuracy.

New 3-character categories are placed within chapter ranges, and 4-character codes are added to existing categories where space allows. Alternatively, new codes are placed at the end of the specific body system chapter. For example, categories **H01** to **H03** are operations on the appendix, whereas category **H04** relates to operations on the colon and rectum. Therefore, if there is a requirement for a specific operation on the appendix to be included in OPCS-4, and no room exists within the categories (**H01-H03**), the code will be placed in the most suitable available space, typically at the end of the chapter.

There are also instances where an existing full category needs extension. In such cases, and dependent on the chapter capacity, an extended category has been added within the chapter. These categories are referred to as principal category or extended category and are identified by an accompanying note within the classification to ease navigation. In addition, notes are added to the Table of Coding Equivalence file to identify principal and extended categories to aid analysts.

OPCS-4 is accessible online using the NHS Classifications Browser.

OPCS-4 consists of two volumes:

- Volume I is the Tabular list, comprising a descriptive classification of interventions and procedures
- Volume II contains Alphabetical Indices of interventions and procedures

Electronic data files (which include the Tables of Coding Equivalence, Metadata file, Codes and Titles file and specifications) are issued via [TRUD](#) to support implementation in systems.

National Clinical Coding Standards are published yearly. The standards reflect the rules, definitions and principles governing the use of the classification and the current clinical coding standards that must always be applied when assigning codes to ensure accurate and consistent clinical coding.

6. Concept of Operation

The standard categorises interventions and procedures of a patient's treatment during an episode of care into alphanumeric codes, according to certain criteria, for example, Primary total prosthetic replacement of hip joint using cement is coded to **W37.1**.

Implementers, such as system suppliers contracted by trusts or trust in-house IT support services, download the OPCS-4 Codes and Titles and Metadata files from the [TRUD Service](#).

The OPCS-4 files are installed on patient administration systems or other hospital information systems. They are used to validate the codes assigned by clinical coders to the procedures and interventions documented in the patient medical record by a clinician. The clinical coders use the NHS Classifications Browser and commercial encoders. They interrogate various modules of the Electronic Patient Record system or use paper case notes to access the relevant patient information and translate this into classification codes in accordance with a complex coding framework e.g. rules, definitions and guidance that are designed to standardise the way to code information to ensure consistency in the data. The coded information is stored in hospital Information systems and is extracted, as part of the Commissioning Data Set, at regular intervals and submitted to the Secondary Uses Service.

More information about the processing of Hospital Episode Statistics (HES) which includes OPCS-4 and ICD-10 data can be found [here](#).

Clinical coders are trained to assign OPCS-4 codes according to the rules of the classification and national clinical coding standards.

OPCS-4 may also be used by other staff depending on local operational requirements.

Where there are SNOMED CT enabled electronic patient record systems in place, operations will be captured in SNOMED CT and mapped to OPCS-4. The NHS England

Terminology and Classifications Delivery Service provides the national maps from SNOMED CT to the classifications (ICD-10 and OPCS-4). The maps make it easier to use these standards together and support interoperability across the health system. The maps support the standard and are distributed as part of the regular terminology releases to appropriately licensed NHS suppliers and other users via TRUD.

The maps adhere to the classification coding frame, national clinical coding standards and guidance. The application of the national standards, as part of the mapping process, is pivotal to users of SNOMED CT in order to meet the mandatory requirement to provide Care Professional Admitted Care Episodes coded to the OPCS-4 and ICD-10 standards.

Data analysts and financial accountants within trusts, the National Casemix Office, Department of Health and Social Care (DHSC) performance analysts/statisticians, UK Health Security Agency, Office for Health Improvement & Disparities and audit organisations use the codes to support operational and strategic planning, epidemiology, performance indicators, health care commissioning and producing various statistical outputs. Clinicians may use the codes to support medical audit and research.

The OPCS-4 Tables of Coding Equivalences (ToCE), supplied via [TRUD](#), provide analysts with a guide to the codes that should have been used for interventions and procedures in previous versions. The vast majority of codes are not affected by the new updates.

Each maintenance release is supported by updated electronic OPCS-4 data files, NHS Classifications Browser, clinical coding standards, and implementation guidance. Classroom training is provided, if warranted, by the degree of change.

Trusts, their system suppliers and staff, are familiar with the change process, having implemented regular updates since 2006.

6.1. Out of scope

The following are items outside the scope of this standard:

- Conditions recorded by the International Statistical Classification of Diseases and Related Health Problems – Tenth Revision, known as ICD-10.
- Point of care recording systems – OPCS-4 is not intended or designed for point of care recording by a clinician. It is a statistical tool that requires adherence to and application of specified definitions and rules to enable accurate, consistent and comprehensive capture of data for secondary purposes. SNOMED CT enabled electronic health records incorporate national maps to the classifications to support the derivation of classification data for secondary use purposes.
- Mappings - these provide the link from the SNOMED CT terminology (used for point of care recording by clinicians) to OPCS-4.
- Administrative or demographic data.

- Procedures typically undertaken in General Practice for example prescribing, practice administration, General Medical Services (GMS) or Personal Medical Services (PMS) contracts.
- Allied Healthcare Professions activities.
- Healthcare Resource Groups (HRGs) - these are standard groupings of clinically similar treatment which use common levels of healthcare resource. They are used as the unit of currency to determine fair and equitable reimbursement for care services delivered by providers. The NHS England National Casemix Office is responsible for the mapping of OPCS-4 codes to HRGs for use in associated groupers. The OPCS-4 update will be incorporated into HRGs to ensure the codes are accepted in the grouper(s) to be used from April 2026 onwards.

6.2. Data Sets (excluding Commissioning Data Sets)

Where OPCS-4 is used in data sets OPCS-4.11 - the mandated version - must be used from 1 April 2026.

Important Note: Updates to the classifications and coding standards are implemented at the start of the fiscal year, i.e. 1 April, rather than potentially taking place at any point throughout the fiscal year, for example, 1 January. Having a regular fixed point for changes enables analysts to extract meaningful statistics for local/national purposes, including time series data and the NHS payment scheme data.

6.3. Training and education

The benefits to be gained from the OPCS-4 updates depend upon:

- clear, concise and accurate clinical information provided within current source documentation for the episode of care
- accurate, consistent and complete application of the classification to reflect the procedures detailed in the clinical record.

Health care providers need to ensure that those staff groups affected by the updates are aware of the OPCS-4 implementation and the mandatory requirement for all Care Professional Admitted Care Episodes and day cases that finish on or after 1 April 2026 to be recorded to OPCS-4.11.

Those responsible for clinical coding in trusts are encouraged to arrange awareness sessions. Targeted training sessions benefit those groups of staff and specialties most impacted by the updates. This includes clinical, information, finance and other staff groups that provide information (in the case of clinicians) or use the data to support mandatory data collections as well as local service planning and patient care delivery.

To facilitate awareness sessions, the Terminology and Classifications Delivery Service has developed the summary of changes, key learning points and training materials so that

approved clinical coding trainers and clinical coding managers can use or adapt to meet the local needs of their various staff groups.

Clinical coding managers need to ensure that clinical coding staff receive adequate training so that the updates can be accurately and consistently applied as part of the coding process. The type of training required will depend on local circumstances.

The Terminology and Classifications Delivery Service provides national reference and training materials to support the coding community as follows:

- **The OPCS-4 National Clinical Coding Standards** for clinical coders is updated to reflect changes made to OPCS-4. This publication contains the national clinical coding standards, rules and conventions pertaining to OPCS-4. .
- **Awareness materials** are provided to support the coding community, as necessary.
- **A range of core national clinical coding training materials** are provided to ensure consistent application of the well-defined standards and to improve the quality of clinical data coded to ICD-10 and OPCS-4. All existing materials are updated to reflect enhancements to the classifications. A train-the-trainer programme, operated by the Terminology and Classifications Delivery Service, approves a body of clinical coding trainers skilled in delivering the national training materials. This ensures consistent delivery and dissemination of national clinical coding standards and subsequently consistent and accurate data.
- **Key Learning Points** outlining the main changes/key differences are published on the Terminology and Classifications Delivery Service website to prepare the coding community for the implementation of OPCS-4.

6.4. National Clinical Coding Qualification (UK)

The examination to accredit clinical coders is delivered by the Institute of Health Records and Information Management (IHRIM) - the awarding and administrative body. Examinations are held in September and March in every financial year. The syllabus covers coding standards for ICD-10 and OPCS-4. Examinations are based on the mandated classification at the time of the examination.

7. Data Quality

The national clinical coding audit methodology and associated auditor workshop will be updated where appropriate to reflect changes to the classifications. The methodology describes a framework for audit of coded clinical data in ICD-10 and OPCS-4. It enables auditors to have confidence in their findings, provides the necessary information to make relevant changes and achieves continuous quality improvement, resulting in a robust data quality cycle. The methodology and audit requirement are part of the [DAPB0086 Data Security and Protection Toolkit](#) (DSPT).

8. Clinical Safety

The OPCS-4 does not use patient identifiable data or affect patient safety in itself. However, the data generated from coding activity provides a rich source of information and when utilised with other parameters, it can contribute to the identification of cohorts of patients for more detailed analysis.

Should a local organisation use classification data for clinical purposes such as clinical audit, or transfer clinical coding as part of inter-provider transfer of care, the organisation should follow clinical safety standards:

- DCB0160 Clinical Risk Management: its Application in the Deployment and Use of Health IT Systems
- DCB0129 Clinical Risk Management: its Application in the Manufacture of Health IT Systems

There are no known adverse events to date. The change should not alter this position.

In the event of an adverse incident this would be logged with the Information Standards helpdesk and tracked for either resolution or escalation as part of the Service Level Agreement for incident management. If an incident arose involving NHS England data files due process would be activated. Where information is known to be used inappropriately, the Terminology and Classifications Delivery Service would approach the organisation about the incident and seek a satisfactory resolution. If further action is required, it may necessitate the matter being referred depending on the severity.

9. Requirements for Health Care Providers

High quality relevant data is a key commissioning tool. The requirements set out below will help organisations to meet data quality requirements to support their business and deliver better care to patients.

#	Requirements ¹
1	All Care Professional Admitted Care Episodes and day cases that contain interventions/operations MUST be recorded to OPCS-4.11 on or after 1 April 2026 (see # 6 below) and until further notice to support mandatory data collections including Admitted Patient Care Commissioning Data Sets (CDS), other Central Returns and data collections as detailed in the NHS Data Model and Dictionary (http://www.datadictionary.nhs.uk).
2	All Health Care Providers that are required to submit interventions/operations for Admitted Patient Care Commissioning Data Sets (CDS), Central Returns for secondary uses as well as a number of other data collections as defined in the NHS Data Model and Dictionary MUST implement the updates in readiness for implementation on 1 April 2026.
3	Health Care Providers MUST implement OPCS-4.11 data files for 1 April 2026 as described in the OPCS-4 Metadata file specification available via the Technology Reference data Update Distribution Service (TRUD).
4	Health Care Providers MUST use the OPCS-4.11 classification and National Clinical Coding Standards OPCS-4.11 from 1 April 2026.
5	Health Care Providers MUST conform to the “output” specification as provided in the NHS Data Model and Dictionary . See Appendix 1 for list of data set flows.
6	Health Care Providers MUST apply OPCS-4.11 to all applicable Care Professional Admitted Care Episodes that finish on or after 1 April 2026.
7	Health Care Provider Systems MUST support the clinical coding of Care Professional Admitted Care Episodes in OPCS-4.10 and OPCS-4.11 as part of the transition to the updated classification. See Requirements for NHS IT Systems : rows three and four for details of transition.

¹ The key words MUST, SHOULD and MAY are defined in the information standards development methodology. They follow [RFC-2119](#).

8	Health Care Providers SHOULD retain reference copies of all previous versions of OPCS-4.
9	Health Care Providers MUST continue to abide by the guidance that regulates the submission of Commissioning Data Sets (CDS) to Secondary Uses Service (SUS).
10	Health Care Providers SHOULD conform to DCB0160 Clinical Risk Management: its Application in the Deployment and Use of Health IT Systems and DCB0129 Clinical Risk Management: its Application in the Manufacture of Health IT Systems , if implementing OPCS-4.11 requires a new release of your software.
11	Health Care Providers MUST comply with the Licence Agreement which is available on TRUD (Technology Reference data Update Distribution).

10. Requirements for NHS IT Systems

#	Requirements
1	NHS IT systems/software MUST use the data files and associated specifications released via TRUD to support the requirements listed below.
2	All systems that use OPCS-4 codes to support Admitted Patient Care Commissioning Data Sets (CDS), Central Returns for secondary uses as well as a number of other data collections as defined in the NHS Data Dictionary and listed at Appendix 1 MUST be updated to OPCS-4.11 in line with the implementation date of 1 April 2026.
3	Systems MUST support the coding of Care Professional Admitted Care Episodes finishing on or after 1 April 2026 in OPCS-4.11.
4	Systems MUST support the coding of Care Professional Admitted Care Episodes finishing on or before 31 March 2026 in OPCS-4.10 or earlier versions as appropriate.
5	Where a Hospital Provider Spell contains episodes before and after 1 April 2026 the system MUST be able to support the use of both versions – OPCS-4.10 for episodes that end before 1 April 2026, and OPCS-4.11 for episodes that end on or after that date.
6	System outputs MUST continue to abide by the guidance that regulates the submission of Commissioning Data Sets (CDS) to Secondary Uses Service (SUS).
7	IT systems that support SNOMED CT enabled sites MUST use 41.5.0 - 18 February 2026 SNOMED CT UK Edition release Cross-maps available via TRUD (Technology Reference data Update Distribution) to support the above requirements.

8	Information systems MUST have integrity checks and validations to support data accuracy. Validation failures will be reported by the system in order to check for the entry of an incorrect OPCS-4 code or the display of an incorrect patient record. It is envisaged that checks will be performed via the User Interface or other methods appropriate to locally agreed clinical coding practice which ensures data integrity and compliance. See OPCS-4.11 Metadata file specification, available via TRUD , for information on integrity checks and validations.
9	IT systems SHOULD conform to DCB0160 Clinical Risk Management: its Application in the Deployment and Use of Health IT Systems and DCB0129 Clinical Risk Management: its Application in the Manufacture of Health IT Systems , if implementing OPCS-4.11 requires a new release of your software.
10	Users of OPCS-4 MUST comply with the Licence Agreement which is available on TRUD (Technology Reference data Update Distribution).

11. Conformance Criteria for Systems

#	Conformance	Yes/No
1	The OPCS-4.101 electronic data files exist on systems that are used to support Care Professional Admitted Care Episodes, day cases and other data sets specified in the NHS Data Dictionary that require the recording of hospital interventions and procedures from 1 April 2026 and until further notice.	
2	The OPCS-4.10 to OPCS-4.11 code changes listed in the Summary of Changes * document have been implemented and are available to the clinical coding function to code the relevant procedures present in the patient medical record. *The Summary of Changes from OPCS-4.10 to OPCS-4.11 is also issued in the OPCS-4.11 TRUD pack and on Delen and lists new, retired and changed codes.	
3	Codes and descriptions new to OPCS-4.11 <u>are present</u> in the 2026/2027 (and until further notice) Commissioning Data Sets (CDSs) and central returns where the applicable operations exist in the patient medical record.	
4c	Codes and descriptions new to OPCS-4.11 are <u>not present</u> in the 2025/2026 Commissioning Data Sets (CDSs) and central returns.	

5	Systems permit coding to OPCS-4.10 and OPCS-4.11 to support the transition to the updated classification.	
6	Where a Hospital Provider Spell contains episodes before and after 1 April 2026 the system supports the use of both versions as expressed in the requirements.	
7	The OPCS-4 codes residing within the Hospital Information System are valid for the relevant year(s), for example, OPCS-4.6 in use at 1 April 2011 – 31 March 2014.	
8	Clinical Coding systems disallow the use of retired codes after the date of retirement. The codes will continue to be available for coding and analyses of data collected before date of retirement.	
9	Data coded to OPCS-4.11 conforms to the metadata parameters as specified in the OPCS-4.11 Metadata file specification available via TRUD.	
10	CDS data continues to flow to SUS without any debasement of content.	
11	OPCS-4.11 is available from the implementation date on 1 April 2026 until further notice.	
12	Patient data coded to OPCS-4.10 and previous versions continues to be available for analyses.	
13	OPCS-4.10 codes derived from the terminology cross-maps conform to the above conditions, where applicable.	
14	OPCS-4.10 codes, assigned by classification encoders, conform to the above conditions, where applicable.	
15	Patient Information Systems conform to the classification definitions provided in the NHS Data Model and Dictionary.	

12. Conformance Criteria for Users

#	Conformance	Yes/No
1	Clinical coders are familiar with the changes in OPCS-4.11, and have attended training courses where provided, before using the new version.	

2	Clinical coders are aware of the changes that affect their specialties and have liaised with clinicians, as necessary.	
3	Clinical coders are using OPCS-4.11 for the coding of all Care Professional Admitted Care Episodes (Hospital Provider) that finish on or after 1 April 2026.	
4	Clinical coders have informed senior management where their clinical coding applications have not been updated to OPCS-4.11.	
5	Clinical coders are using the latest National Clinical Coding Standards OPCS-4.11 for the coding of all Care Professional Admitted Care Episodes (Hospital Provider) that finish on or after 1 April 2026.	
6	NHS England Approved Clinical Coding Trainers are using the updated national clinical coding courses and/or have developed/updated their in-house courses in line with the documentation supplied by the Terminology and Classifications Delivery Service.	
7	NHS England Approved Clinical Coding Auditors use OPCS-4.11 when undertaking data quality inspections of all Care Professional Admitted Care Episodes (Hospital Provider) that finish on or after 1 April 2026.	
8	Analysts/statisticians use the Table of Coding Equivalences (ToCE), available in the OPCS-4.11 TRUD pack, for longitudinal analysis for data coded to previous versions of OPCS-4	
9	All OPCS-4 users have familiarised themselves with OPCS-4.11 and assessed the impact on their work.	

13. Conformance criteria for Terminology and Classifications Delivery Service

This section describes the tests to be performed to indicate that the information standard is supported by the NHS England Terminology and Classifications Delivery Service.

#	Conformance
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1	Notification of change to the standard issued to users and stakeholders in the Terminology and Classifications Delivery Service Newsletter before end of April 2025.
2	Final summary of changes between OPCS-4.10 and OPCS-4.11 published concurrently with the Information Standards Notice (ISN) in November 2025.
3	SUS to be made aware of additions /amendments to the list of Anonymous and Legally Restricted Codes, as necessary.
4	OPCS-4.11 Information Standards Notice (ISN) published following Data Assurance Board (DAB) approval.
5	Key learning points published in January/February 2026.
6	OPCS-4.11 data files released via TRUD concurrently with the publication of the Information Standards Notice (ISN) to the schedule provided in the Notification.
7	OPCS-4.11 made available in the NHS Classifications Browser in January/February 2026.
8	Updated National Clinical Coding Standards OPCS-4.11 released via Delen and the NHS Classifications Browser in January/February 2026.
9	Training needs of clinical coders and other users assessed by September 2025.
10	Core national standard training materials published by 31 March 2026.
11	OPCS-4.11 coding queries answered by the Terminology and Classifications Delivery Service within the terms of the Service Level Agreement.

14. Conformance criteria for the NHS England National Casemix Office

#	Conformance
1	HRGs incorporate OPCS-4.11 updates to ensure the codes are accepted in the grouper(s) to be used from 1 April 2026 onwards.

15. Contacts

The following table lists the contacts for the standard.

Developer	
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16. Appendix 1: Data Sets that flow OPCS-4 codes

The Data Sets in the NHS Data Model and Dictionary that flow OPCS-4 codes are as follows:

Data Set	Link to Data Dictionary
Cancer Outcomes and Services Data Set - Core	https://www.datadictionary.nhs.uk/data_sets/clinical_data_sets/cosds/cancer_outcomes_and_services_data_set_-_core.html
CDS V6-2 Type 020 - Outpatient CDS	https://www.datadictionary.nhs.uk/data_sets/cds_v6-2/cds_v6-2_type_020_-_outpatient_cds.html#dataset_cds_v6-2_type_020_-_outpatient_cds
CDS V6-2 Type 120 - Admitted Patient Care - Finished Birth Episode CDS	https://www.datadictionary.nhs.uk/data_sets/cds_v6-2/cds_v6-2_type_120_-_admitted_patient_care_-_finished_birth_episode_cds.html#dataset_cds_v6-2_type_120_-_admitted_patient_care_-_finished_birth_episode_cds
CDS V6-2 Type 130 - Admitted Patient Care - Finished General Episode CDS	https://www.datadictionary.nhs.uk/data_sets/cds_v6-2/cds_v6-2_type_130_-_admitted_patient_care_-_finished_general_episode_cds.html#dataset_cds_v6-2_type_130_-_admitted_patient_care_-_finished_general_episode_cds
CDS V6-2 Type 140 - Admitted Patient Care - Finished Delivery Episode CDS	https://www.datadictionary.nhs.uk/data_sets/cds_v6-2/cds_v6-2_type_140_-_admitted_patient_care_-_finished_delivery_episode_cds.html#dataset_cds_v6-2_type_140_-_admitted_patient_care_-_finished_delivery_episode_cds
CDS V6-2 Type 180 - Admitted Patient Care - Unfinished Birth Episode CDS	https://www.datadictionary.nhs.uk/data_sets/cds_v6-2/cds_v6-2_type_180_-_admitted_patient_care_-_unfinished_birth_episode_cds.html#dataset_cds_v6-2_type_180_-_admitted_patient_care_-_unfinished_birth_episode_cds
CDS V6-2 Type 190 - Admitted Patient Care - Unfinished General Episode CDS	https://www.datadictionary.nhs.uk/data_sets/cds_v6-2/cds_v6-2_type_190_-_admitted_patient_care_-_unfinished_general_episode_cds.html#dataset_cds_v6-2_type_190_-_admitted_patient_care_-_unfinished_general_episode_cds

CDS V6-2 Type 200 - Admitted Patient Care - Unfinished Delivery Episode CDS	https://www.datadictionary.nhs.uk/data_sets/cds_v6-2/cds_v6-2_type_200_-_admitted_patient_care_-_unfinished_delivery_episode_cds.html#dataset_cds_v6-2_type_200_-_admitted_patient_care_-_unfinished_delivery_episode_cds
Neonatal Critical Care Minimum Data Set	https://www.datadictionary.nhs.uk/data_sets/supporting_data_sets/neonatal_critical_care_minimum_data_set.html#dataset_neonatal_critical_care_minimum_data_set
National Neonatal Data Set - Episodic and Daily Care	https://www.datadictionary.nhs.uk/data_sets/clinical_data_sets/national_neonatal_data_set/national_neonatal_data_set_-_episodic_and_daily_care.html
Paediatric Critical Care Minimum Data Set	https://www.datadictionary.nhs.uk/data_sets/supporting_data_sets/paediatric_critical_care_minimum_data_set.html#dataset_paediatric_critical_care_minimum_data_set
Radiotherapy Data Set	https://www.datadictionary.nhs.uk/data_sets/clinical_data_sets/radiotherapy_data_set.html#dataset_radiotherapy_data_set
CDS V6-3 Type 020 - Outpatient CDS	https://www.datadictionary.nhs.uk/data_sets/cds_v6-3/cds_v6-3_type_020_-_outpatient_cds.html#dataset_cds_v6-3_type_020_-_outpatient_cds
CDS V6-3 Type 120 - Admitted Patient Care - Finished Birth Episode CDS	https://www.datadictionary.nhs.uk/data_sets/cds_v6-3/cds_v6-3_type_120_-_admitted_patient_care_-_finished_birth_episode_cds.html#dataset_cds_v6-3_type_120_-_admitted_patient_care_-_finished_birth_episode_cds
CDS V6-3 Type 130 - Admitted Patient Care - Finished General Episode CDS	https://www.datadictionary.nhs.uk/data_sets/cds_v6-3/cds_v6-3_type_130_-_admitted_patient_care_-_finished_general_episode_cds.html#dataset_cds_v6-3_type_130_-_admitted_patient_care_-_finished_general_episode_cds
CDS V6-3 Type 140 - Admitted Patient Care - Finished Delivery Episode CDS	https://www.datadictionary.nhs.uk/data_sets/cds_v6-3/cds_v6-3_type_140_-_admitted_patient_care_-_finished_delivery_episode_cds.html#dataset_cds_v6-3_type_140_-_admitted_patient_care_-_finished_delivery_episode_cds

CDS V6-3 Type 180 - Admitted Patient Care - Unfinished Birth Episode CDS	https://www.datadictionary.nhs.uk/data_sets/cds_v6-3/cds_v6-3_type_180 - admitted patient care - unfinished birth episode cds.html#dataset cds v6-3 type 180 - admitted patient care - unfinished birth episode cds
CDS V6-3 Type 190 - Admitted Patient Care - Unfinished General Episode CDS	https://www.datadictionary.nhs.uk/data_sets/cds_v6-3/cds_v6-3_type_190 - admitted patient care - unfinished general episode cds.html#dataset cds v6-3 type 190 - admitted patient care - unfinished general episode cds
CDS V6-3 Type 200 - Admitted Patient Care - Unfinished Delivery Episode CDS	https://www.datadictionary.nhs.uk/data_sets/cds_v6-3/cds_v6-3_type_200 - admitted patient care - unfinished delivery episode cds.html#dataset cds v6-3 type 200 - admitted patient care - unfinished delivery episode cds
Patient Level Contract Monitoring (PLCM) Data Set	https://www.datadictionary.nhs.uk/data_sets/supporting_data_sets/patient_level_contract_monitoring_data_set.html#data set patient level contract monitoring data set
Healthcare Operational Data Flows Data Set: Acute – Current	https://www.datadictionary.nhs.uk/data_sets/supporting_data_sets/hodf_data_set/healthcare_operational_data_flows_data_set_acute_-_current.html
Healthcare Operational Data Flows Data Set: Acute – Admission	https://www.datadictionary.nhs.uk/data_sets/supporting_data_sets/hodf_data_set/healthcare_operational_data_flows_data_set_acute - admission.html
Healthcare Operational Data Flows Data Set: Acute – Discharge	https://www.datadictionary.nhs.uk/data_sets/supporting_data_sets/hodf_data_set/healthcare_operational_data_flows_data_set_acute - discharge.html
Healthcare Operational Data Flows Data Set: Acute - Out-Patient	https://www.datadictionary.nhs.uk/data_sets/supporting_data_sets/hodf_data_set/healthcare_operational_data_flows_data_set_acute - out-patient.html