



Public Health
England

Protecting and improving the nation's health

Sexual and Reproductive Health Activity Data Set (SRHAD) Implementation Guidance

About Public Health England

Public Health England exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. We do this through world-class science, knowledge and intelligence, advocacy, partnerships and the delivery of specialist public health services. We are an executive agency of the Department of Health, and are a distinct delivery organisation with operational autonomy to advise and support government, local authorities and the NHS in a professionally independent manner.

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This information standard (SCCI1518) has been approved for publication by the Department of Health 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 Standardisation Committee for Care Information (SCCI), a sub-group of the National Information Board.

This information standard comprises the following documents

- Requirements Specification
- Change Specification
- Implementation Guidance.

An Information Standards Notice (SCCI1518 Amd 92/2015) has been issued as a notification of use and implementation timescales. Please read this alongside the documents for the standard.

The controlled versions of these documents can be found on the [NHS Digital 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.

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Glossary of Terms:

Term	Acronym	Definition
British Association for Sexual Health and HIV	BASHH	A professional organisation representing those working in specialist services addressing sexually transmitted infections, HIV and other sexual health problems – see further details here: www.bashh.org/about-bashh/about-bashh/
Faculty of Sexual and Reproductive Healthcare	FSRH	A professional organisation representing those working in SRH services– see further details here: www.fsrh.org/home/
Previous annual aggregated return from SRH services	KT31	Returned to HSCIC (now NHS Digital) annually and known as the KT31 Family Planning (Contraception) Activities Collection Form. DSCN 30/2003
Long Acting Reversible Contraception	LARC	This includes implants, injections and intra-uterine devices used by women as a long term reversible method of contraception.
Lower Layer Super Output Area	LSOA	A geographic area with an average population of 1,500 that can be mapped from postcodes and is useful for reporting small area statistics.
The National Institute for Health and Care Excellence	NICE	Provides national guidance and advice to improve health and social care, such as guidance on LARC: www.nice.org.uk/guidance/cg30?unlid=3413043052015121192257
Standardisation Committee for Care Information	SCCI	The Committee oversees the development, assurance and acceptance of information standards, data collections and data extractions. However, SCCI will be replaced by the new Data Coordination Board from 1 April 2017. Further details are available here: http://digital.nhs.uk/isce and here: http://content.digital.nhs.uk/isce/process
Strategic Data Collection Service	SDCS	The NHS Digital secure data collection system. Further details are available here: http://content.digital.nhs.uk/datacollections/srhad
Sexual & Reproductive Health	SRH	Sexual and reproductive health services were formerly known as family planning clinics or contraception and sexual health services (CASH)

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1 Introduction

1.1 Purpose of this document

This document aims to support sexual and reproductive health services and system suppliers in implementing the latest version of the Sexual and Reproductive Health Activity Data Set (SRHAD) information standard from April 2017, and also by April 2020 for new organisation codes.

1.2 Supporting Documents

Reference	Title
http://www.content.digital.nhs.uk/isce/publication/scci1518	Change Specification
http://www.content.digital.nhs.uk/isce/publication/scci1518	Requirements Specification
http://content.digital.nhs.uk/datacollections/srhad	SRHAD General Guidance
http://content.digital.nhs.uk/datacollections/srhad	SRHAD Summary Guidance
http://www.content.digital.nhs.uk/isce/publication/scci1518	Data Dictionary Change Request - SRHAD Changes

The SRHAD General Guidance now combines the previously separate guidance for clinic staff and technical guidance. This provides key guidance on data recording rules, the required format of variables, data submission requirements and insight into how the data is processed and used. The SRHAD Summary Guidance provides a quick reference regarding the required content.

1.3 Contacts

NHS Digital is responsible for collecting the SRHAD data and Public Health England (PHE) is responsible for the development of the SRHAD standard. The organisations work closely together and consult with a wide range of stakeholders, including clinical, policy, commissioning and technical leads/experts to provide advice on issues raised; improve the quality of the collection; and make best use of the data.

For queries regarding collection or submission of this latest version of the data set, please contact the Data Collections Team at NHS Digital via email: data.collections@nhs.net

For suggestions regarding further development of the data set, please contact the Risk Factors Intelligence Team, Chief Knowledge Officer Directorate, at PHE via email: srhad@phe.gov.uk

1.4 Background

The Sexual and Reproductive Health Activity Data Set (SRHAD) mandates the collection of contraceptive activity data from sexual and reproductive health (SRH) services in a standardised data return. Additional SRH activities are also recorded. SRHAD came into effect on 1 April 2010 and replaced the aggregate KT31 Central Return which was finally discontinued in March 2014.

SRHAD is required by the Department of Health to support monitoring of key policy initiatives such as: increasing access to all methods of contraception, including Long Acting Reversible Contraception (LARC) methods and emergency contraception for women of all ages and their partners; reducing teenage conceptions; reducing rates of unintended pregnancies; and modernisation of SRH services. It also supports commissioners in understanding which population groups are accessing SRH services and which services they are receiving.

1.5 Summary of changes

Since the last change to the SRHAD standard was approved in 2014, a number of amendments have been required to confirm the change from quarterly to annual submissions introduced in 2015/16, and also to align with item definitions in the NHS Data Dictionary. Most of the alignment changes are minor. However, this also includes advance notice of new organisation codes to be introduced in 2020.

NHS Digital's data validation rules are also now explicitly described in the SRHAD guidance. These include additional validation rules introduced for 2015/16 submissions onwards to help address problems with data quality and to provide further guidance on coding. These may change in future following further assessment of data quality, feedback from providers and consultation with other stakeholders.

There is also some clarification regarding SRHAD coverage for selected services in GP Practice settings.

Please refer to the Change Specification for further details.

1.6 Option to run test submissions

NHS Digital has advised service providers and system suppliers in emails circulated June 2015 and again in August 2016 that there is the option to run test submissions at any time of the year to check and address data quality issues, and avoid last minute problems. This will be particularly important for new service providers, expanded collections and for those service providers who have previously encountered data submission problems.

Further details on submitting data via the Strategic Data Collection Service (SDCS) can be found here: <http://content.digital.nhs.uk/datacollections/srhad>

NHS Digital can advise further on requirements and can be contacted via data.collections@nhs.net

2 Implementation processes

2.1 Service providers

The following eight actions will vary in importance and order depending on whether services/staff are new, have yet to implement the 2014 agreed changes, have already managed to implement the last changes for the 2015/16 data collection, and/or may need to expand collection to further service settings.

Action 1: READ the Information Standards Notice

This is the official notification that the Information Standard has been approved by the Standardisation Committee for Care Information (SCCI). It will provide an outline of the approved standard and timeframe for compliance. Compliance with Information Standards Notices will normally be included in contracts between service providers and their IT software suppliers.

Action 2: READ the Change Specification

This provides a summary of the latest changes to the data set and data submission processes, and timescales for delivery. It also discusses the role of the introduction of data validation rules and provides some clarification regarding recording of SRHAD in GP practice settings.

Action 3: READ the Requirements Specification

This provides full details of the SRHAD implementation requirements and conformance criteria for service providers, and includes details regarding data submissions.

Action 4: READ the latest SRHAD guidance

This provides the most detailed information and explanation about the data items in the data set, definitions and values which can be recorded. This will be particularly useful for those required to provide staff training or advice regarding data recording.

Note that the guidance will be updated for any future agreed changes to data validation rules. For example, 'warnings' may be changed to 'errors' for certain variables if it has been decided that service providers have had enough time to implement required changes. The validation rules are summarised in the Appendices of the **Requirements Specification**. NHS Digital/PHE will also endeavour to provide advance notice of any rule changes that are likely to result in an increase in errors.

Action 5: IDENTIFY REQUIREMENTS and DISCUSS with stakeholders

It is essential to engage with those who are involved in recording, checking, submitting and/or using the data in or for your organisation. This will include:

- Clinical/multi-disciplinary teams
- Coordinators and Managers
- Data entry staff
- Informatics/IT Department
- Commissioners

Action 6: TALK to your software supplier

If you have a commercial system, you will need to speak with your supplier to confirm the timescale for any necessary changes to the system that you use.

Action 7: PLAN how you will implement changes

For the majority of service providers who were able to record the 2014 agreed changes and submit annual data for 2015/16, very little additional effort is likely to be required for implementation from 1 April 2017. However, they will need to consider whether collection needs to be expanded to reflect all service settings by 1 April 2018.

For new or expanded services, it is strongly advised that service providers run test submissions well in advance of the end of the final year submission date (6 weeks after the end of the financial year) to iron out any data quality issues. However, this would be good practice for all service providers, particularly those who have previously encountered significant problems with data validation rules applied to submissions.

The introduction of specific coding structures for other home countries, the Channel Islands and Isle of Man, instead of the use of default codes, will only affect a minority of records, and providers were provided with advice regarding the other home country codes in the SRHAD guidance issued in March 2015.

However, system suppliers should flag the existence and enable recording of the new Channel Islands and Isle of Man codes, once these are released, and phase out availability of the existing default codes. Service providers should ensure that staff members are aware of the new codes once these are released.

Service providers should also ensure that their software supplier are providing the latest lookups to ensure that background mapping files such as postcode to Lower Layer Super Output Area (LSOA) and local authority mapping and GP practice code mapping files are updated regularly. These are available quarterly from the Office of National Statistics. NHS Digital also provides postcode and GP practice mapping files in data downloads available via: <https://digital.nhs.uk/organisation-data-service>

New services that will come into existence from 1 April 2020 will need to ensure that their IT system will be able to record the new an5 format organisation code. The new

organisation codes will not be an issue for existing data submitters unless there is an organisation change and this occurs on or after 1 April 2020.

Step 8: Check for updates and engage nationally

NHS Digital will continue to publish additional information and updates on the SRHAD collection website: <http://content.digital.nhs.uk/datacollections/srhad>

Please use the NHS Digital and PHE contact emails provided in section 1.3 above to raise any issues with the SRHAD collection/submission and ideas for future developments of the data set. Please also note any email circulations from NHS Digital/PHE and respond to any consultation requests regarding proposed developments.

Service providers should also encourage their software supplier to engage with the joint 'BASHH/FRSH Information Group' if not already doing so. Please email NHS Digital for contact details. The majority of SRH software suppliers are represented on this group and this is a useful forum for consultations.

Finally, it has been noted in the requirement specification that PHE and NHS Digital are considering future developments of XML data submission format and also implementation of SNOMED coding (the latter requirement needs to be implemented nationally by 1 April 2020), and will issue further communications on this in due course.

2.2 NHS Digital/PHE

NHS Digital will only need to make minor adjustments to accommodate the changes in organisation and area codes, and is able to address planned or any future changes to selected validation rules. NHS Digital will continue to provide support for service providers in submitting the data set. NHS Digital and PHE will continue to monitor data submissions and the effect of any changes, and should there be any untoward outcomes, PHE will consult with local providers and commissioners again regarding any further required changes.

3 Further organisational issues

3.1 Resources/Costs

The Department of Health sponsors the SRHAD collection. SRHAD is a SCCI approved data set and has been implemented in relevant services since 2010. The amendments set out in this Information Standard apply to an existing working model and therefore amendments to data items can be easily deployed at little or no cost.

Changes to data submission frequencies have already been implemented by all service providers. Challenges experienced by some providers in dealing with expanded validation rules implemented for 2015/16 submissions onwards can be addressed in future by running test submissions earlier in the year. The change of one selected validation rule from errors to warnings at least in an interim period will also support providers.

The change in submissions to NHS Digital from the 'Data Depot' to the 'Strategic Data Collection Service' (SDCS) has reduced the need for manual intervention by NHS Digital and should improve the experience for service providers.

The reduction from quarterly to annual extracts will also reduce collection and processing costs for NHS Digital and PHE.

3.2 Information Governance

SRHAD data are pseudo-anonymised (i.e. they contain the patient's clinic/hospital number but they do not contain patient-identifiable information such as name, date of birth, or postcode). The data and their storage and access are under strict control, and are governed by NHS Digital Data Sharing Policy. Person-level data shared with PHE is further pseudo-anonymised by replacing the clinic/hospital number with a pseudo ID.

Until recently, Section 251 of the NHS Act 2006 provided the legal basis for the collection of SRHAD. The Department of Health have now issued a Direction to provide the legal basis for this collection. All information is used in accordance with the Data Protection Act 1998, the Public Health (Control of Disease) Act 1984 and the Public Health (Infectious Diseases) Regulations 1988, and the NHS Act 2006 (section 251). All records are kept securely in compliance with the Caldicott Guidelines.

3.3 Data Quality

SRHAD data coverage of service providers has greatly improved and almost 100% coverage has been attained. NHS Digital advises on accepted national data format standards and SRHAD data can only be submitted in the defined format stated in the [Requirements Specification](#). The NHS Digital automated validation rules assist with improvements in data quality. Consultations with relevant stakeholders (such as those described in the [Change Specification](#)) inform these validation rules and also assist with interpretation. NHS Digital publishes an annual report on SRHAD data quality alongside the annual analysis of data. The quality of selected variables is also presented by service provider in the accompanying data tables.

3.4 Communication

The change from quarterly to annual submissions was communicated to all data submitters and main system suppliers by NHS Digital in an email dated 15 June 2015. NHS Digital also had follow up communications with those providers experiencing problems with the subsequent year data submissions. As a result of this, NHS Digital circulated a further email on 23 August 2016 announcing and encouraging the option for service providers to undertake test submissions at any point in the year to test and address data quality issues in advance of the final submission date.

The agreed change to the SRHAD standard will also be communicated via the following methods:

- Publication of the SCCI Information Standards Notice
- Updates on NHS Digital's main SRHAD web page and web links from this Information Standards Notice
- NHS Digital email to service providers and main software suppliers
- PHE's regional sexual health facilitators' local communications with service commissioners and providers
- PHE's Contraceptive and Reproductive Health Data Advisory Group, which includes representation from the Department of Health, clinicians/service providers, FSRH, BASHH, commissioners, NHS Digital and PHE (including PHE regional sexual health facilitators).
- The Joint BASHH/FSRH Information Group which includes representation from clinicians/service providers, NHS Digital, PHE and the majority of SRH software suppliers
- Links provided to latest SRHAD documentation from various data analysis products, including NHS Digital's annual SRH services report and PHE's Sexual and Reproductive Health Profiles.
- Feedback in response to queries and issues highlighted via the NHS Digital and PHE SRHAD contact emails.