

Statement of Administrative Sources

**Annex B: Supporting metadata
Hospital Prescribing, England**

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Statement of Administrative Sources

Organisation	The Health and Social Care Information Centre (HSCIC) http://www.hscic.gov.uk/		
Enquiries	Please contact the Health and Social Care Information Centre Contact centre Telephone: 0845 300 6016 and email: enquiries@hscic.gov.uk		
Responsible Statistician	Name: Kate Croft Section: Prescribing & Medicines Use Team		
Section 1: Statistical End Product	Hospital Prescribing, England		
		Source 1	Source 2
Section 2: Original Administrative/ Management Source/System	Name	IMSHealth HPAI (for some of data used)	ePACT system (for some of data used)
	Name of the organisation responsible	IMS Health	Prescription Services, NHS Business Services Authority
	Purpose of the administrative source	IMS Health, commercial interest	Re-imburement of dispensers
	Unit of Inquiry	Medicines by Pack	Prescription
	Intended Coverage	National/England	All prescriptions prescribed in England
	Actual Coverage	It is based on a sample of trusts although that sample covers over 99% of the beds in trusts in England. There are known problems when a product is used via an aseptic unit (where a drug is prepared for use by dilution). The data received by IMS Health does not always indicate the physical amount of the drug in a bag prepared for infusion and an estimate has to be made using average doses. Data from some aseptic units does not appear in data submitted to IMS Health. Another known deficiency is when medicines are supplied to patients in their homes using a process	All prescriptions prescribed in England

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		known as homecare. Although the service (including the medicines used) is paid for by the trust, the details are not always recorded in the pharmacy system and so may not appear in the data provided to IMS Health. This means that the figures are likely to be an underestimate of the medicines used. Note that the costs are not necessarily the true cost paid by the trusts; costs are added by IMS health from the Drug Tariff & other price lists.	
	Geographical Coverage	England	England
	Lowest level of Geographical Coverage	Area Team	Area Team
	Extent to which statistical end-producers can influence system?	None	Quarterly liaison meetings between HSCIC, DH and NHS Prescription Services
	Data definitions used	Volume/pack and cost	Items, quantity and cost, see BSA website for details of database http://www.nhsbsa.nhs.uk/PrescriptionServices/Documents/PCA_Glossary_V2_-_04-06-13.doc
	Classification systems used	World Health Organisation Anatomical Therapeutic Chemical (ATC) classification system	British National Formulary (BNF) published by British Medical Association and Royal Pharmaceutical Society, see www.bnf.org.uk
	Data Collection Process	1)Periodicity/Timing 2)Validation process	Data is downloaded through secure access from IMS Health, via the internet. This occurs each month. Data is received both at a national and a sub-national level.
			Data is provided to the HSCIC monthly about 6 weeks after the end of the month. Prescription Services have an accuracy target of payments to dispensers being between 99.8% and 100.2% of the “true” payment as determined by a

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			statistical process.
	Access Arrangements	Release of hospital data is governed by an agreement between the HSCIC and IMS Health.	Controlled by the data controller
	Dissemination Procedures	As per agreement between HSCIC and IMS Health	ePACT data are made available to NHS organisations and to DH on request by NHS Prescription Services
	Publication procedure	none	none
	Timing/Periodicity of public release	none	none
	Nature of changes to system that could impact on statistics	Changes in relationships between Trusts and Area Teams. Changes to Trusts which contribute data to IMS Health. Changes in volume of medicines recorded by the trust, caused by medicine use no longer being recorded through Hospital pharmacies or bodies that contribute to IMS Health.	Re-organisation of NHS
Section 3: Change Process	It is unlikely that data aggregated to a new structure would be available if any re-organisation took place. There would therefore be a discontinuity in the time series.		
Section 4: The subsequent statistical production process	Validation procedures	Validation takes the form of comparing the National total against sub-national totals.	Data is independently extracted by another member of staff and compared with initial extraction. Results compared with previous year.
	Quality assessment	IMS quality assure	NHS Prescription Services have an accuracy target of payments to dispensers being between 99.8% and 100.2% of the “true” payment as determined by a statistical process.
	Periodicity of release	Annual	Annual

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	Potential impact of changes to the source on the statistics produced	Impact would be dependent on the type of change. Is the potential for the source to disappear completely, given that IMS Health are a commercial organisation.	Minor changes to BNF not likely to be a problem. Changes to the NHS organisation structure would need to be carefully managed.
	Procedures for mitigating such discontinuities	We would estimate impact and provide conversion if required/appropriate, methodology change notices and liaison with stakeholders	