

CHILDREN AND YOUNG PEOPLE'S PATIENT EXPERIENCE SURVEY 2020

COVID19 VARIABLE CODING Q&A Document

Last updated: 20th January 2021

COVID-19 Diagnosis

Q. Do COVID-19 variables need to be submitted with the sample?

No – both COVID-19 variables can be submitted after the main sample submission in a sample attribution file. The deadline for submitting the sample attribution file is July 9th 2021.

Q. How exactly should this variable be derived from ICD-10 codes U07.1 and U07.2?

Category	ICD-10/11 codes
1 = COVID-19 positive confirmed via testing	U07.1 means COVID-19 virus identified (and treated as COVID-19).
2 = COVID-19 suspected but testing inconclusive	U07.2 means COVID-19 virus not identified (but treated as if they have COVID-19).
3 = COVID-19 testing status unknown	Trust has no record of whether patient was tested, and neither U07.1 or U07.2 is coded.
4 = COVID-19 negative confirmed via testing	Trust has a record of the patient being tested, but neither U07.1 (positive) or U07.2 (suspected) is coded.
5 = COVID-19 not-suspected, not tested	Trust knows that the patient was not tested, and neither U07.1 (positive) or U07.2 (suspected) is coded.

Q. How should patients be allocated if they don't have either U07.1 or U07.2 coded?

Please refer to the table above to distinguish between categories 3, 4 and 5. Trusts would require additional records to distinguish between codes 3, 4 and 5. If they do not have any additional records, anyone without U07.1 or U07.2 should be coded as "3 = COVID-19 testing status unknown".

Q. What if we are testing every patient admitted?

This will mean you have no patients in categories 3 or 5.

Q. How should we treat patients tested on multiple days?

COVID-19 status should be based on any test during their stay. For example, if a patient was negative on admission and tested positive 5 days later, this positive test should be counted.

Q. Is this asking for test results before or after admission?

If a patient tested positive before being admitted to hospital, and this was known at the time of admission and/or was relevant to that admission, they should be coded as category 1 "positive confirmed via testing". However, if (for example) your records show the patient tested positive six months before being admitted to hospital and was admitted for something unrelated to COVID-19, this should not be counted as a positive test.

Q. Should the variable be based on Primary Diagnosis or all Secondary Diagnosis positions for ICD-10/ICD-11?

Though the ICD-10/ICD-11 Chapter Code variable is based on the primary diagnosis at discharge, for the COVID-19 diagnosis variable we'd recommend also including secondary positions.

Q. Should we use any other relevant ICD-10 codes for this variable? For example additional WHO codes for COVID-19 & Z11.5 special screening examination and Z03.8 suspected but ruled out by negative laboratory results?

No. Please provide your coding based on U07.1 and U07.2 codes only.

COVID-19 Treatment

Q. Why are you collecting two different variables?

The CQC engaged with NHS trusts to discuss the feasibility of requesting information on whether patients had a hospital experience relating to COVID-19, and the outcome was that there may be some variation in how this was being recorded, through a combination of ICD-10 codes and local records. Therefore, the recommendation was to ask for two variables within sample files, which could be cross-referenced to identify discrepancies and provide a more accurate derived variable.

Q. How does this differ to the COVID-19 diagnosis variable?

This variable aims to capture potential scenarios in which people had a negative test (or were not tested) but were assumed to have COVID-19 and treated as such due to symptoms. We appreciate there may be some overlap between the two variables requested and will triangulate the two variables and survey question at the analysis stage.

Q. What are the locally held records?

At the time of consulting NHS trusts about this variable, there was variability in how trusts were recording COVID-19 on locally held records. We would appreciate you looking into the most suitable way to produce these categories, and would be happy to discuss if you have any queries or concerns.

Q. Does this relate to whether a patient stayed in a hospital/room ward for those with COVID-19 or whether they received treatment for COVID-19?

If the patient has either stayed in a hospital room/ward for those with COVID-19 or received treatment for COVID-19, please code them as "Treated as COVID-19".

Q. What if we don't have any additional local records/we can't practically identify it through local records because of the sample size. Can we derive this from ICD-10 codes also?

This variable aims to capture potential scenarios in which people had a negative test (or were not tested) but were assumed to have COVID-19 and treated as such due to symptoms. Some overlap is anticipated in the two variables, but we hope this will also capture some cases of COVID-19 that the "diagnosis" variable does not.

It would be much appreciated if you could look into the feasibility of using locally held records. If you do not have this, you can derive from ICD-10 codes also if that's what is most appropriate. Please do submit both variables.

Suggested mapping for deriving the COVID-19 treatment variable from the COVID-19 testing variable:

COVID-19 Testing variable	COVID-19 Treatment Variable
1 = COVID-19 positive confirmed via testing	1 = Treated as confirmed or suspected COVID-19
2 = COVID-19 suspected but testing inconclusive	1 = Treated as confirmed or suspected COVID-19
3 = COVID-19 testing status unknown	3 = Status unknown
4 = COVID-19 negative confirmed via testing	<p>The mapping of this can vary.</p> <p>For example, there may be a scenario in which a patient was “treated” as COVID-19 until test results were received. If this is indicated through local records, please code as “1 = Treated as confirmed or suspected COVID-19”.</p> <p>If every patient is being tested by the NHS trust, a COVID-19 testing variable “4 = COVID-19 negative confirmed via testing” could map to COVID-19 treatment variable “2 = Treated as non-COVID-19”.</p> <p>If it is unknown, please code as “3 = Status unknown”</p>
5 = COVID-19 not-suspected, not tested	2 = Treated as non-COVID-19