

# ATTRIBUTION INSTRUCTIONS

## NHS URGENT AND EMERGENCY CARE SURVEY 2020

Last updated: September 2020

## Adherence to the procedures outlined in this document

It is extremely important to follow the instructions in this manual carefully.

The Section 251 approval for this project provides a legal basis for trusts to share names and addresses with approved contractors, for the purpose of sending out questionnaires. **NHS trusts must not send patient identifiable data, such as patient names and/or addresses to the Survey Coordination Centre for Existing Methods (SCCEM).** Any breach of the conditions will be reported to the Care Quality Commission (CQC) and the Confidentiality Advisory Group at the Health Research Authority. Note however that patients' postcodes are to be submitted with the sample and are excluded from the restriction for patient identifiable data as per Section 251 approval.

CQC use patient survey data for performance monitoring, and the data are also used by NHS England and NHS improvement and the Department of Health and Social Care for Patient Experience Outcome Measures and the NHS Outcomes Framework.

**We request that all trust staff involved in drawing samples or compiling attribution files are made aware of the importance of checking previously written code and other historical arrangements,** to minimise the risk of historic errors being repeated and the risk that your trust's survey results cannot be used.

## Updates

Before you start work on your survey, check that you have the **latest version** of this document (the date of the last update is on the front page). This document is available from the NHS Surveys website <https://nhssurveys.org/surveys/>

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## General Information

This year, CQC and the SCCEM will conduct additional analysis of patient experience based on variables that were not collected previously. The first variable will identify whether patients were on a Same Day Emergency Care pathway. The second variable will identify whether patients were streamed into a COVID-19 cohort area. Consultation with trusts during spring 2020 showed that these variables might not be available at the time of initial sampling (October). Therefore, we ask trusts to submit them separately as part of **an attribution file**. The attribution file should be **submitted directly to the SCCEM by 29<sup>th</sup> January 2021 and is optional** as we are aware this data may not be available across all trusts. If you do have access to these sample variables, we strongly encourage you to send us this information as it will be valuable in analysing how patient experiences differed. This data will **only** be required for patients who **attended a Type 1 department**.

We request that you submit the attribution information in a **separate file** after your sample is submitted and approved. There are three main reasons for this:

- Attribution data does not need to be approved before mailings can begin, unlike the sample data. Asking for attribution and sample data to be submitted at the same time may lead to delays in starting the questionnaire mailings due to the extra time needed to compile, check and query the attribution information.
- Provide trusts with more time to pull together the attribution file. We are also aware some Same Day Emergency Care data is coded retrospectively, and therefore allows additional time to gather this information.
- The attribution data needs to be **submitted directly to the SCCEM** rather than via a contractor, unlike the sample data.

## Section 1: Sample variables included within the attribution file

The attribution file requires two additional sample variables, Same Day Emergency Care indicator and a Coronavirus (COVID-19) stream indicator.

### Same Day Emergency Care (SDEC) indicator

Same Day Emergency Care (SDEC) is the provision of care for emergency patients within a single day who would otherwise be admitted to hospital. As set out in the NHS Long Term Plan, all hospitals with a 24 hour emergency department (Type 1) should be providing SDEC services by the end of 2019/20. This additional data will be useful to understand how SDEC is experienced by patients. Information about the differences in service provision quality and patient experience could be used to further improve this newly established service.

We will require an indicator which details whether each patient in your Type 1 sample went down the SDEC pathway or not. The format in which you should input this information is, 1 =

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SDEC patient, 0 = Non-SDEC patient, 9 = unsure. An example can be seen in Table 3 below.

## Coronavirus (COVID-19) stream indicator

Coronavirus (COVID-19) has significantly impacted the NHS system and services provided. Within secondary acute care, it became apparent that patients attending a hospital setting would encounter changes in their experience due to interventions introduced for particular services. Guidance by NHS England and Public Health England advises creating cohort areas within emergency departments, separating patients with suspected or confirmed COVID-19 symptoms from those with other clinical presentations (non-COVID symptoms). We are requesting trusts to provide an indicator for each patient to highlight if they were streamed in the Covid-19 cohort area or in the non-Covid-19 area. Please note that this is **not an indicator of COVID-19 diagnosis** (i.e. whether the patient was tested and diagnosed with COVID-19). For example, a patient with COVID-19 symptoms might have been treated in a separate Covid-19 cohort area due to their clinical presentation but their test results might have later come back negative. This data will help us to understand whether patient experience differs dependent on the area they were streamed into. This will be important in enabling us to understand the impact of the pandemic on services and patients' experiences of those services.

We will require an indicator which states whether each patient in your type 1 sample was streamed into cohort areas of the type 1 department, these may have been known as red or green areas. The format you should use to input this information is, 1 = patient was treated in a separate cohort area for suspected or confirmed Covid-19 patients, 0 = patient was treated in a 'regular' area for non-infected patients, 9 = unsure. An example of this can be seen in Table 3 below.



### What if my trust does not record this data?

If your trust does not record this data you do not need to submit the attribution file. This is attribution file is optional.

### What if my trust only records one of these sampling variables?

If your trusts only records SDEC data or only COVID-19 streaming data, then please submit the data you do record. Please submit the data you have access to, and leave the other variable blank.

## Section 2: Complete the attribution file

To complete the attribution exercise you will first need to download the [Attribution Spreadsheet](#) and determine whether you record SDEC data and COVID-19 streaming data for patients that attended your Type 1 department in September 2020.

This document will take you through the steps for compiling and submitting your attribution data.

### Step 1: Check you have the final version of your sample file



**During this exercise you will be entering your sample data into the Attribution Spreadsheet. Before you start, contact your contractor (if applicable) to check that you have the final, approved version of your sample file. This is very important.**

Your contractor may have corrected small errors in your sample file after you submitted it to them, such as adding or removing patients. Therefore you may not have the most up-to-date version of your file. If so, ask them to securely transfer it to you if possible.

You need to have the final version of your sample file because the SCCEM checks your attribution data against your final sample file to make sure all of the records match up. During data analysis, we merge your attribution data with your sample data using the trust code and the Patient Record Number (PRN), to ensure that we are assigning the correct information to the correct patient.

If trusts do not use their final sample file as a starting point to create their attribution file, the SCCEM will need to query this with these trusts. This can slow down the approval process and create more work for the trusts involved.

### Step 2: Download the Attribution Spreadsheet and insert your Patient Record Number

- 1) Once you have downloaded the [Attribution Spreadsheet](#), save it as UEC20\_Attribution File\_XXX (where XXX is your trust code).
- 2) Now, copy the final version of your sample data into the tab labelled 'Data'. The first column is your 3 letter trust code, second column you will need to copy over your Patient Record Number, e.g. UEC20RTE000. The Patient Record Number should match the variable of the same name in the Sample Construction Spreadsheet 2.

## Step 3: Insert the data into sampling variables

- 1) Fill in the SDEC and COVID-19 stream columns with your patient data as shown in Table 3 below.
  - a. **SDEC variable**
    - i. Enter **1** for patients who **were** treated as a SDEC patient
    - ii. Enter **0** for patients who **were not** treated as a SDEC patient
    - iii. Enter **9** if you are unsure
  - b. **COVID-19 stream variable**
    - i. Enter **1** for patients who **were** treated in a Covid-19 stream
    - ii. Enter **0** for patients who **were not** treated in a Covid-19 stream
    - iii. Enter **9** if you are unsure
- 2) Complete some checks and ensure this data has been correctly attributed to the correct Patient Record Number. Please ensure this data has not been misaligned.

NHS Trust code	Patient Record Number	SDEC	COVID-19 Stream
RTE	UEC20RTE0001	1	1
RTE	UEC20RTE0002	0	1
RTE	UEC20RTE0003	9	0
RTE	UEC20RTE0004	1	0
RTE	UEC20RTE0005	0	9
RTE	UEC20RTE0006	1	9

*Table 3: Example of Attribution Spreadsheet*

## Step 4: Submit your file to the SCCEM

Complete the following steps to submit your completed Attribution Spreadsheet to the SCCEM's secure transfer site. The submission deadline is Friday, 29<sup>th</sup> January 2021. If you have any problems please contact us.

- 1) Make sure your attribution file is saved as UEC20\_Attribution File\_XXX (where XXX is your trust code).
- 2) Check that your sample does not contain any patient identifiable data, i.e. patient names, NHS numbers, and addresses.

3) Password-protect your file with a password of your choosing.

4) Each trust has their own unique username and password for the Survey Coordination Centre's secure transfer site. Contact us at [emergency@surveycoordination.com](mailto:emergency@surveycoordination.com) to request your login details.

5) Once you have uploaded your file, call us on 01865 208 127 to provide the password to your file.



- Attribution files need to be submitted directly to the SCCEM's secure transfer site (NOT via email).
- If you are using a contractor, do not submit your attribution file to your contractor's file transfer site (the one you submitted your sample file to). Sending the attribution file to a contractor would be a Section 251 process breach and would require follow-up action.
- In-house trusts can use the same login details that they used to submit their sample to the SCCEM.