



Public Health
England

Protecting and improving the nation's health

ICU Data Capture System User Guide

Local Authority Mapping

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-leading science, research, knowledge and intelligence, advocacy, partnerships and the delivery of specialist public health services. We are an executive agency of the Department of Health and Social Care, and a distinct delivery organisation with operational autonomy. We provide government, local government, the NHS, Parliament, industry and the public with evidence-based professional, scientific and delivery expertise and support.

Public Health England
Wellington House
133-155 Waterloo Road
London SE1 8UG
Tel: 020 7654 8000
www.gov.uk/phe
Twitter: [@PHE_uk](https://twitter.com/PHE_uk)
Facebook: www.facebook.com/PublicHealthEngland

For queries relating to this document, please contact: ICCQIP.surveillance@phe.gov.uk



© Crown copyright 2020

You may re-use this information (excluding logos) free of charge in any format or medium, under the terms of the Open Government Licence v3.0. To view this licence, visit [OGL](https://www.ogil.io). Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

Published October 2020

PHE supports the UN
Sustainable Development Goals



Document History

Most documents should feature a summary section. Please delete this page if this is not required.

Revision Date	Author	Version
15/05/2018	Public Health England	1.0
08/10/2020	Public Health England	1.1

Contents

About Public Health England	2
Document History	3
Local Authority mapping	5
Local Authority Mapping Process	5
Overview of Local Authority Attribution	5

Local Authority mapping

Local Authority Mapping Process

All positive blood culture cases reported to the ICU DCS are attributed to a Local Authority, regardless of their ICU categorisation (ICU-associated or Pre-ICU, please see 'Overview of categorisation algorithm to determine ICU-associated infections' User Guide for more information) or CCG attribution.

PHE's ICU DCS does not currently request organisations to record patient Local Authority details for any ICU positive blood culture episodes entered onto the DCS.

To obtain this data an extract comprising patient NHS number, forename, surname, gender and date of birth are submitted to the NHS Digital, via Demographics Batch Services (DBS), on a daily basis to identify patient GP registration details and patient residential postcode.

Overview of Local Authority Attribution

The Local Authority for each case is attributed, in the following order:

- If the patient's residential postcode is available (and is based in England), the case will be attributed to the Local Authority in which the patient is a resident.
- If the patient's postcode is unavailable but the patient's GP practice code is returned by the tracing process, the case is attributed to the Local Authority catchment area in which the GP practice is based.
- For cases entered by the NHS: If both the patient's GP practice code and patient post code are unavailable or if a patient has been identified as residing outside England, then the case is attributed to a Local Authority based upon the postcode of the HQ of the Intensive Care unit that reported the case.
- For cases entered by the Independent Sector: If both the patient's GP practice code and patient post code are unavailable or if a patient has been identified as residing outside England then the special code '9IS' is used in place of a Local Authority code.

Note: the retrospective attribution of cases to a Local Authority may be less accurate in older cases, as the original ICU DCS (used May 2016-October 2018) did not perform this automatic Local Authority attribution and these were done for older cases when they were migrated to the current ICU DCS. Therefore, Local Authority mapping in cases prior to October 2018 should be treated with caution and only used as an indication of the trend over time for a given Local Authority.