

# **Independent regulators, the Department of Health and data collection from the NHS**

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## **Abstract**

This paper is a short note outlining the problems that occur when multiple government central bodies need to collect data from the NHS.

## **The Regulator**

The Postgraduate Medical Education Training Board (PMETB) was established by the General and Specialist Medical Practice (Medical Education, Training and Qualifications) Order 2003 (HMSO, 2003) to develop a single, unifying framework for postgraduate medical education and training. It began operations on 30 September 2005.

Under this order, approval of specialty training programmes, posts and GP trainers rest with PMETB. Furthermore PMETB has the power to request information from organisations employing trainee doctors. In 2006, as part its quality assurance work, PMETB conducted a survey of trainee doctors across the UK. This involved obtaining data from deaneries on the headcount of trainee doctors in approved posts by location (for instance an NHS Trust) and specialty. There was some duplication of effort as the Department of Health and the Modernising Medical Careers Team were also collecting similar data.

## **Department of Health - The staff census**

In England, the Department of Health conducts an annual census of doctors. In 2006 this census (Information Centre, 2006) used pay scales to determine the grade of the doctor and did not collect data on whether the doctor was in an educationally approved post as required for PMETB's work. Doctors were classified as follows:

Registrar group: Refers to the combined grouping of specialist registrars, senior registrars and registrars and other staff working at equivalent grades that are not in an educationally approved post.

Doctors in training and equivalents (previously known as junior doctors): Registrar group, senior house officer, foundation programme doctors, house officers and other staff working at equivalent grades that are not in an educationally approved post.

## **Modernising Medical Careers**

Modernising Medical Careers also requested that deaneries conduct a census as part of the preparation for the new model of specialty training to be launched in August 2007 (Modernising Medical Careers, 2006). This was to identify all the posts that would be available for applicants to the new system to apply for. Deaneries were asked to convert trust posts into training posts (that is educationally approved posts). The numbers of posts have since been published to allow applicants to see the competition ratios. (Medical Training Application Service, 2007). So at the point PMETB needed headcount data of doctors in approved posts, deaneries were reclassifying posts. PMETB requested that the figures referred to a particular point in time before the reclassification.

## **The Concordat**

PMETB is a signatory to the Concordat (Concordat, May 2006) and as such is required to reduce the burden of data collection where possible by sharing data. The Department of Health's Information Centre provides a framework for ensuring data collection is streamlined and proportionate: the Review of Central Returns - ROCR (Information Centre, 2007). However because Arms Length Bodies are designed to be independent from government there is a ROCR-lite (sic) process where the responsibility for approving parts of the data collection rests with collecting body. Data collections are listed in the Information Catalogue (Information Centre, 2007). However the Information Centre does not provide a facility to obtain the data contained in the collections it lists, nor the opportunity to influence what data is collected to allow it to be used for additional purposes by other bodies. For the Concordat to be effective it needs to be strengthened, to allow members to comment on proposed

data collections; to allow members timely access to others' data and to allow access to others' data at the level of aggregation required for analysis. This however would seem to make Concordat members less independent, when that is precisely the quality they are trying to demonstrate.

## References

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