

NATIONAL HEALTH SERVICE

HOSPITAL IN-PATIENT ENQUIRY

Summary. This memorandum requests those hospital authorities whose hospitals (other than mental and mental deficiency hospitals) are not now taking part in the Hospital In-patient Enquiry to do so, if possible with retrospective effect to 1st July, 1957.

1. In R.H.B. (48) 70/B.G. (48) 59 the National Morbidity Enquiry was introduced, to collect information about the treatment of hospital in-patients. It was later re-named the Hospital In-patient Enquiry and modified to cover only a 1 in 10 sample of in-patients—see R.H.B. (51) 45/B.G. (51) 43 and R.H.B. (52) 50/B.G. (52) 49. The Enquiry, which is conducted jointly by the Ministry and the General Register Office, aims at collecting and tabulating basic information, including diagnosis, about hospital in-patients (other than those in hospitals solely for mental illness or mental deficiency) by means of this 10 per cent. sample.
2. The Enquiry has now reached a stage where returns are being made for the overwhelming majority of hospital beds, other than those in hospitals solely for mental illness or mental deficiency. The Minister is grateful for the co-operation of the hospitals that are already taking part.
3. It was made clear in the earlier memoranda that, although the modified Enquiry was first to be tried at the hospitals which already participated in the earlier 100 per cent. Enquiry, together with any others wishing to take part, the ultimate intention was to extend it to all non-mental hospitals. Hitherto the Minister has not formally requested all Boards and Committees to participate, but he considers that the time has now come to bring in without further delay the few remaining hospitals, so that the Enquiry may, as intended, give fully representative information which can be related to population. At present the value of the results for comparative purposes on a local, regional or national basis is seriously impaired by the abstention of a very small number of non-participant hospitals, which is vitiating the valuable work of the participants.
4. Approaches have already been made, directly and through Regional Hospital Boards, to the Hospital Management Committees and to the Board of Governors responsible for the non-participant hospitals. The replies received suggest that the chief obstacle to participation is fear of the effect of the extra work on already hard-pressed clerical staff. The Minister considers that these fears have in some instances been exaggerated. The Enquiry deals with only a 10 per cent. sample of in-patients; it follows, therefore, that even a hospital with as many as 4,000 discharges and deaths a year will have an average of only eight forms a week to deal

*To: Regional Hospital Boards,
Hospital Management Committees,
Board of Governors.*

with. Once the officer concerned has become used to handling the forms, this should require about two hours of work a week.

5. Concern has also been expressed about the possibility that the Enquiry will mean further work for the medical staff. Here, too, there seems to be some misconception. It should normally be possible for a clerical officer to complete the forms from the medical records without consulting the medical staff.

6. The Minister accordingly requests all Hospital Management Committees and Boards of Governors concerned to complete, for every tenth patient admitted, Form H.I.P. 1A (or Form H.I.P. 1B for maternity cases). The beds to be covered by the Enquiry should be all except those in hospitals solely for mental illness or mental deficiency, and should include pre-convalescent, convalescent and rehabilitation beds, and beds for the sick in non-transferred Local Authority institutions. If possible forms should be completed retrospectively to 1st July, 1957, for those hospitals which have not previously participated, so that adequate information can be obtained for the whole of the year. Most Boards and Committees should already be in possession of copies of the forms and the detailed instructions for completing them; those who are not can obtain supplies from the General Register Office, Somerset House, London, W.C.2.

7. Regional Hospital Boards are asked to submit to the Minister not later than 31st July a statement showing the extent of participation in their Regions, with a full explanation of the circumstances of any case in which a hospital is not participating by that date. The Board of Governors which is not yet fully participating is similarly asked to report on the position not later than 31st July.

8. R.H.B. (48) 70/B.G. (48) 59, R.H.B. (51) 45/B.G. (51) 43 and R.H.B. (52) 50/B.G. (52) 49 are hereby cancelled.

MINISTRY OF HEALTH,
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