Public Health England changes to chlamydia data collection and reporting

1. In 2012 several changes were made to the collection and reporting of chlamydia activity data, to deliver a simpler and more representative national surveillance system. This technical summary document explains these changes. It is important to note that as a result of the revisions, chlamydia data for 2012 onwards are not directly comparable with data reported in earlier years.

General

2. From January 2012, chlamydia screening data for England are presented by calendar year (January-December). Previously data were presented by financial year (April-March).

Chlamydia Testing Activity Dataset

3. Between 2008 and 2011, community (non-GUM) chlamydia tests and diagnoses were reported using two systems; the NCSP core data return recorded all those tests carried out in NCSP registered settings; and an aggregate laboratory reporting system recorded all tests carried out in non NCSP, non-GUM settings.

4. In January 2012 these two data sources were replaced by a single laboratory reporting system, the Chlamydia Testing Activity Dataset (CTAD). CTAD now collects data on all chlamydia tests carried out in NHS and local authority commissioned laboratories in England.

5. Quarterly data tables for 2012 that were based on NCSP and non-NCSP/non-GUM reporting systems have been superseded and archived, and should not be used. The new data tables based on CTAD and GUMCAD should be used instead.

Age groups

6. CTAD collects data on all age groups tested for chlamydia. CTAD tables published on the NCSP website report data for 15-24 year olds only, reflecting the age group targeted by the programme. Chlamydia tables published on the Public Health England (PHE) website (previously Health Protection Agency) report data for all ages.

Area of residence

7. Under CTAD, chlamydia test and diagnosis data are attributed to the relevant local authority using the Patient Postcode of Residence data code. If a record is submitted to CTAD without Postcode of Residence completed, an algorithm is used to attribute it using the Postcode of GP or Postcode of Testing Service data codes – which may be less accurate.

8. Records for patients accessing services outside their resident local authority may be inaccurately attributed to another local authority if Postcode of Residence data is not completed by the laboratory. If all three geographical identifier codes are missing it is not possible to assign a record to an area of residence, and these data are excluded from national published reports.
GUMCAD

Removal of double-counted chlamydia tests

9. New GUMCAD codes (C4X, C4OX & C4RX) were introduced in 2011 and are now widely used. These codes allow the identification of chlamydia cases diagnosed outside of GUM and referred to GUM for management.

10. Using these codes it is now possible to remove these previously double-counted GUM clinic ‘diagnoses’ from GUMCAD data sets. From 2012, these duplicate data have been removed from diagnosis totals reported in GUMCAD.

Reporting Chlamydia Data by Area of Residence

Combining CTAD and GUMCAD data to report by area of residence

11. GUM clinics report area of residence information to GUMCAD, but do not supply this information to laboratories. Therefore, in order to report all chlamydia data by area of residence, PHE now combines community data collected via CTAD with GUM data collected via GUMCAD.
   a. GUM data collected via CTAD are removed. Correct substitution relies on accurate coding of Testing Service Type by laboratories reporting CTAD data. Inaccurate coding may lead to over- or under-counting.

12. From January 2012, community and GUM data from the same quarter (e.g. April-June 2012) have been combined to produce total quarter data, by area of residence.
   a. Prior to 2012, community data were combined with GUM data from the previous quarter, e.g. (April-June community) + (January-March GUM), to produce total data.

13. PHE will publish final data tables following the end of each quarter (calendar year).

Counting Repeat Tests

14. From January 2012, the way repeat tests are counted in GUMCAD and CTAD changed. A maximum of one chlamydia test and diagnosis per individual are now counted within a six week period. Any further tests or diagnoses within the six week period are not counted. This applies to all chlamydia tests, irrespective of the result.

Population Data

15. From January 2012, diagnosis and coverage rates have been calculated using ONS 2011 population estimates, based on the 2011 census. Prior to this, rates were calculated using ONS population estimates based on the 2001 census. In areas where the 15-24 year old population has changed significantly this will affect data.

Chlamydia Data Tables & Further Information

- NCSP data tables can be accessed here
- STI data tables can be accessed here
- For further information, please contact ctad@phe.gov.uk