

Draft recommendations as of June 2023

**To be finalised by the Ethnicity Coding Standards Special
Interest Group**

Recommendations

1. Collection and recording of ethnicity data and other determinants of health

It is recommended that collection of ethnicity data as well as wider determinants (such as -socio-economic status, religion, language) and individual characteristics should be sought consistently across the health and social care sectors to enrich completeness of information to tackle health inequalities.

2. Ethnicity coding standardisation

Standardised ethnicity categories such as the Office for National Statistics (ONS) 19 ethnic group categories should be adopted across the four nations; and all research data and routine collected data should collect the highest possible level and report at a minimum of five levels. More on the ONS 19 ethnic group categories [here](#).

3. Communication and transparency

High-quality and reliable research based on use of routinely collected data is strictly dependent on patients understating the purpose of data collection and providing accurate information. A concerted effort should be made across the healthcare system to ensure the positive value of using data for research and innovation for societal benefit is widely articulated. Clear communication and explanations of the reasons for asking about personal information, including ethnicity, is also crucial.

4. Training and guidance for healthcare professionals

Healthcare professionals play a key role in data collection. But there is some reluctance or lack of knowledge about the importance of data collection. It is recommended that standard guidance is distributed across NHS settings for healthcare professionals to consider in their interactions with patients. Staff training for standardisation of recording of ethnicity data would also be needed. Any training material and guidance should be developed with input from ethnic minority public contributors.

5. Data linkage to improve completeness

Linkages of datasets from different data sources can help enrich the information needed and data completeness. For ethnicity and other determinants of health, as well as other protected characteristics, linkage can be used as strategy to increase data quality. Efforts to ensure system interoperability between settings across the UK should be made, leveraging work around NHS England Secure Data Environments and in line with the [Goldacre recommendations](#).