

Nutrition Transfers of Care: A recommended digital dataset for London

The recommended digital dataset has been defined below, with the data fields defined by the standards outlined in the National Transfer of Care Initiative noted in **blue text** for ease of identification. You can read more about the initiative, and the mandatory information standards notice (ISN) in the supporting documentation, Nutrition Transfers of Care: improving quality, safety, and efficiency across London.

Data	Definition	Source	Include for GP only letter?
Demographics			
NHS Number	The unique identifier for a person within the NHS in England and Wales.	PDS/PAS	Yes
Title	Person title.	PDS/PAS	Yes
Patient Surname	The family name or surname of the person.	PDS/PAS	Yes
Patient Forename	The first name(s) of the person. This includes middle names.	PDS/PAS	Yes
DOB	The date of birth of the person.	PDS/PAS	Yes
Gender	The person's stated gender.	PDS/PAS	Yes
Sex	Optional* The person's phenotypic sex. Determines how the person will be treated clinically.	PDS/PAS	Optional
Address	The recorded residential address for the person.	PDS/PAS	Yes
Email address*	Optional; but recommended for those without a residential address.	PDS/PAS	Yes, if no residential address
Telephone Number	Optional; The person's telephone number.	PDS/PAS	Yes
GP practice	Name and address of the person's GP practice, ideally include the ODS** if available.	PDS/PAS	Yes
Educational Establishment	Optional. If the patient is a child, their school or nursery contact details.	May require EPR build	Optional

Data	Definition	Source	Include for GP only letter?
Accommodation Status*	Optional. Details of the type of accommodation where the person lives. Include if relevant to receiving team.	May require EPR build	No
Immigration Status*	Optional Details of the immigration status of the person, their permissions to live and receive care and support in the UK e.g., asylum seeker, indefinite leave to remain in the UK. Include if relevant to receiving team.	Structured data (coded), EPR	No
Welfare entitlement* (recourse to public funds)	Optional. Entitlement to benefits. Include if relevant to receiving team.	Structured data (coded), EPR	No
Clinical Information			
Reason for Referral Code	The reason that a patient was referred to a Community Health Service: please select from the NHS Data Dictionary ***	Build to select within EPR	Not required
Reason for Referral	Supporting information if required.	Free text, EPR	Not relevant if for ONS only
Problems and Diagnoses (PMHx)	SNOMED CT Diagnosis List – if sending transfer with a discharge letter that contains up to date diagnoses, this may not be required***	Structured data, EPR	Only if not sent with hospital discharge letter.
Medication List	Active medications and dose, only if the referral is not accompanied by a hospital discharge letter.	Structured data, EPR	Only if not sent with hospital discharge letter.
Nutrition and Dietetic Diagnosis (NDD) ^	SNOMED Terminology: Problem Optional: SNOMED Clinical Terminology: Aetiology Optional: SNOMED Terminology List: Symptom.	Can build into structured fields in EPR	Yes
Nutrition Screening Tool Score OR Height, Weight, BMI and % weight loss (<i>absolute centile and centile change for paediatric patients</i>)	All data pieces required to demonstrate how the tool was populated. i.e., Height, Weight, % weight change. Inclusion of a final screening tool score only does not demonstrate how this score was produced. e.g., in MUST, if a person scores 2 for acute disease score, this is very unlikely to apply on discharge from hospital.	Structured data, EPR	Yes, if request for ONS prescription

Data	Definition	Source	Include for GP only letter?
Food Based Strategy Provided	A pre-requisite for a request for an ONS prescription.	Can set as Y/N radio (Boolean) button in document or EPR field.	Yes, if request for ONS prescription
Other nutritional advice	When relevant.	Free text, pull from EPR where possible (e.g. IP or OP consultation notes)	When relevant
ONS Requested from GP ^^	Linking this with formulary/ edited lists where possible. Name, presentation, dose, frequency, suggested or planned review date. A tabulated format has been recommended for primary care ease of prescription. See sample Nutrition TOC and implementation guide. Follow ICS guidance. (Please note that a volume of ml/28d is required to prescribe in primary care systems)	Structured, may require EPR build to auto populate entry	Yes, if request for prescription
ACBS Criteria for ONS prescription ^^^	As a pre-requisite for ONS prescribing at least one must be selected	Structured, would require EPR build.	Yes, if request for prescription
Desired goals/outcomes	Patient centred treatment goal/evidence of shared decision making where possible.	Free text, draw from an EPR entry where possible (e.g. IP or OP consultation notes)	Yes
Follow up	Is the patient being followed up in secondary care, community care, or for discharge from dietetic services. Has the referrer requested any relevant ONS from GP (and to include this letter with the handover)?	Structured, selectable or “choice” fields recommended.	Yes
Medico-Legal			
Capacity Assessment Outcome	To include only if applicable: date and decision of capacity assessment.	Structured data, EPR	Only if not accompanied by hospital discharge

Data	Definition	Source	Include for GP only letter?
Power of Attorney for Health and Welfare	To include only if applicable: name and contact of health and welfare POA.	Structured data, EPR	Only if not accompanied by hospital discharge
Allergies	To include only if applicable: details of any allergies listed in the EPR.	Structured data, EPR	Only if not accompanied by hospital discharge
Deprivation of Liberty Safeguards	Include only if applicable: date and duration of DOLS signed.	Structured data, EPR	Only if not accompanied by hospital discharge
Enabling Access to Dietetic Service			
Consent to referral to Community Nutrition Services*	Has the person consented to the referral? Or was the referral made in best interest (requires evidence of capacity decision if applicable).	Structured (Boolean; Y/N), EPR	Not relevant if not referring to dietetic service.
Preferred language*	The language the person (or NOK), only if this is not English.	EPR if available.	No
Carer details*	To include only if applicable.	May need manual population.	No
How does the patient wish to be communicated to?*	Phone, text, in writing (if known)	Semi-structured, built as “choice” buttons.	No
AIS (Accessible Information Standard)	Include only if relevant, the coded value for reasonable adjustment. Supporting free text if required.	Structured data (code) and specific adjustment required.	Yes
Person Completing Record			
Name (First name Surname)	The same of the person completing the document	Semi-structured or auto populate, depending on EPR configuration	Yes
Profession (specify Job Title)	The job title (should specifically include if ACP or Supplementary Prescriber)	Semi-structured or auto populate, depending on EPR configuration	Yes

Data	Definition	Source	Include for GP only letter?
Grade	The grade of the referrer	Semi-structured or auto populate, depending on EPR configuration	Yes
Professional Identifier	HCPC number of the referrer	Semi-structured or auto populate, depending on EPR configuration	Yes
Contact email*	A team email (such as triaging inbox or similar)	Semi-structured or auto populate, depending on EPR configuration	Yes
Supervisor details*	When the person completing the record is a student dietitian.	Semi-structured or auto populate, depending on EPR configuration	Yes

*Optional data

** ODS is the Organisation Data Services identifier which denotes a code for every healthcare organisation. There is also advice here on which ODS code to use for someone without a registered GP practice. <https://digital.nhs.uk/services/organisation-data-service>

*** [NHS Data Dictionary](#) contains codes for referral to community services. Likely for use in the Nutrition Transfer of Care (but not limited to) are:

046 Nutrition and Dietetics (most common)

032 Feeding/Swallowing Problems

^ Please see the documents on the BDA website, [BDA Toolkit for Digital Dietetic Records](#) for guidance on how to use Standardised Language Terms (SNOMED CT) as they apply to the BDA Model and Process.

^^ This document presents the response of the Advisory Committee on Borderline Substances (ACBS) to the consultation on oral nutritional supplements (ONS), held between 19 April and 1 August 2021, and plans for next steps. <https://www.gov.uk/government/consultations/oral-nutritional-supplements-acbs-policy/outcome/acbs-policy-on-standard-adult-ready-to-drink-oral-nutritional-supplements-consultation-response>

^^^ You may find this document useful ([PrescQIPP ONS Guidelines 3.0](#))