



Professional
Record
Standards
Body

Release Notes

Urgent transfer from care home to hospital

V1.2

Publication Date: 29 April 2021

Updates made due to:

- Feedback from key stakeholders during endorsement
- Feedback from internal reviewers
- Alignment with updates to Core Information Standard and Urgent transfer from care home to hospital to keep consistency
- Feedback from the early adopters involved in the quality partnership scheme

Information model

Sections > Elements	Update	Detail
[Standard title]: Urgent transfer from care home to hospital'	Updated title for the standard	Change the title of the standard to 'Urgent transfer from care home to hospital' from 'Urgent referral from care home to hospital'
Examination findings > observations	Structured observations <ul style="list-style-type: none">- Code- Value- Units of measure- Site- Interpretation Free text	The Observations section has been structured to align with FHIR standards.
Referral Details > Referrer details	Updated description	Description updated to reflect that this could be a transfer from a non-clinical source such as a care home as well as clinical referral (additions in bold): "The details of the referrer that is making the referral or the transfer . This could be the person, GP surgery, department, specialty, sub-specialty, educational institution, mental health team, care home etc"
Referral Details > Reason for referral	Updated description	New description (additions in bold): The reason for referral/ transfer e.g. diagnosis, treatment, transfer of care due to relocation, investigation, second

		opinion, management of the patient (e.g. palliative care), provide referrer with advice / guidance. This may include referral because of carers' concerns.
About Me > My wellness	Updated description	<p>Description updated to include another example (change in bold):</p> <p>A description covering what you are able to do, how you engage with others and how you feel on a typical day through to on a day when you are unwell or really unwell</p> <ul style="list-style-type: none"> - Include any causes that might result in you becoming unwell and strategies for avoiding or addressing the causes. For example, not drinking enough water could cause constipation. - Include any signs that indicate you might be becoming unwell. - On a bad day describe what is different about what you are able to do, how you engage with others and how you feel. - Include how your everyday life is affected by any medical conditions e.g. dementia and any symptoms e.g. itchiness, cough, pain and how you manage those conditions. - Include past health issues or experiences that need to be considered. - Include your wellbeing and lifestyle goals and aspirations
About Me > Please do and please don't	Updated description	<p>Description wording enhanced for greater clarity. Updated description:</p> <p>"A description of things you want someone supporting you to do (or not to do).</p> <p>Things you want someone to do might include (for example): - Talk to me not to my carer, remind me to take my medication, encourage me to wash my hands regularly, explain to me what is happening and why, respond to my</p>

		<p>communication.</p> <p>A description of things you do not want someone supporting you to do might include (for example): - Discussing or asking questions about certain topics, making assumptions about something, providing support when it is not wanted, talking to you in a certain way, undergoing a specific intervention or taking a medication the person does not want.”</p>
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