
Implementation Guidance

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Assessment, Discharge and Withdrawal Notices between Hospitals and Social Services Information Standard Implementation Guidance

Document Management

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Reviewers

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SCCI

**Standardisation
Committee for
Care Information**

This information standard (SCCI2075) has been approved for publication by the Department of Health under [section 250 of the Health and Social Care Act 2012](#).

Assurance that this information standard meets the requirements of the Act and is appropriate for the use specified in the specification document has been provided by the Standardisation Committee for Care Information (SCCI), a sub-group of the National Information Board.

This information standard comprises the following documents:

- Requirements Specification
- Implementation Guidance (this document).

An Information Standards Notice (SCCI2075 Amd 29/2015) has been issued as a notification of use and implementation timescales. Please read this alongside the documents for the standard.

The controlled versions of these documents can be found on the [HSCIC website](#).

Date of publication 22 June 2016.

Superseded

Glossary of Terms

Term / Abbreviation	What it stands for
ADW	Assessment, Discharge and Withdrawal (Notices)
ASC	Adult Social Care
CASSR	Council with Adult Social Services Responsibilities
CDA	Clinical Document Architecture
CQC	Care Quality Commission
DMS	Domain Message Specification
IG	Information Governance
ISCE	Information Standards and Collections (including Extractions)
LA	Local Authority
MESH	Messaging Exchange for Social Care and Health
NIB	National Information Board
SCCI	Standardisation Committee for Care Information
SCIP	Social Care Informatics Project
TDA	Trust Development Authority
TRUD	Technology Reference data Update Distribution

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1. Introduction

1.1 Purpose

1.1.1 Purpose of this document

The purpose of this Implementation Guidance is to provide guidance to all impacted users on how to implement and use the Assessment, Discharge and Withdrawal Notices between Hospitals and Social Services Information Standard, and implement any changes resulting from its release. It should be read in conjunction with the [Requirements Specification](#) for the information standard.

1.1.2 Purpose of the Information Standard

Currently hospitals must determine when it is safe to discharge a patient. Part of that decision making process requires hospital staff to determine whether a care and support assessment is required before they leave hospital care (so appropriate social care can be put in place to support the citizen on exit from hospital). If they suspect an assessment is required, they must notify the local authority's (LA) social services team.

The [Care Act 2014](#)¹, the associated [regulations](#)² and [Care and Support Statutory Guidance](#)³ legislates a minimum dataset for inclusion in that notification process, requiring hospitals to use:

- **Assessment Notices**
Informs the social services team that an assessment will be required, with expected discharge date if known
- **Discharge Notices**
Confirms discharge date to social services
- **Withdrawal Notices**
To withdraw either or both of the above

The purpose of the Notices is to ensure a timely care and support assessment is triggered, and that information required by the social services team is received to facilitate this. Previous legislation related to this flow – the [Community Care \(Delayed Discharges etc.\) Act 2003](#). The [Care Act 2014](#) supersedes this, and therefore the Notices replace what were previously known as 'Section 2s, Section 3s and Section 5s').

¹ The Care Act 2014: Section 74-Schedule 3: Discharge of Hospital patients with Care and Support Needs
<http://www.legislation.gov.uk/ukpga/2014/23/schedule/3/enacted>

² The Care and Support (Discharge of Hospital Patients) Regulations 2014
<http://www.legislation.gov.uk/uksi/2014/2823/made>

³ Care Act 2014: Care and Support Statutory Guidance: Annex G: The process for managing transfers of care from hospital for patients with care and support needs
<https://www.gov.uk/guidance/care-and-support-statutory-guidance>

The Information Standard applies to:

- NHS hospitals and independent hospitals acting on behalf of the NHS as defined by the Care Act 2014⁴
- Councils with Adult Social Services Responsibilities (CASSRs)

1.2 Background

1.2.1 Background to the Information Standard

The Information Standard is one of a group of structured information flows between health and social care settings, and within social care settings, that the Social Care Informatics Project (SCIP) is developing and delivering.

SCIP is a HSCIC project commissioned and sponsored by the Department of Health, established to support more efficient and person-centred transfers of care between health and social care settings, and to drive forward the health and social care integration agenda. It does this through:

1. Providing a common umbrella under which the health and social care integration agenda can sit, and being the mechanism which looks across HSCIC and other organisations to co-ordinate and drive value from existing work streams.
2. Identifying, developing and implementing solutions where there exist barriers to adult health and social care integration. These solutions mainly comprise:
 - i. Defining and testing data sets to facilitate information exchanges between health and social care, or within social care, that directly support a person's care
 - ii. Producing sufficient means of transporting these data sets, to suit different levels of digital maturity (e.g. Clinical Document Architecture (CDA) messages and word/other templates for use on secure email)
 - iii. Enhancing capability for health and care organisations to connect, through encouraging use of secure email and providing 'bridging solutions' such as the 'Adapter'⁵.

The Information Standard work sits under item 2.i. above. The standardisation of the data set within Assessment, Discharge and Withdrawal Notices builds on work undertaken in London to integrate health and adult social care through the use of structured forms, secure email and the Adapter middleware product.

⁴ Care Act 2014 section 74 (7):

“(1) A hospital patient is a person ordinarily resident in England who —

- (a) is being accommodated at an NHS hospital, or at an independent hospital as a result of arrangements made by an NHS body, and
- (b) is receiving (or has received or can reasonably be expected to receive) acute care.”

⁵ The Adapter is a piece of middleware that enables organisations to share unstructured data (secure email with attachments) with organisations that are able to use structured data (no attachments, straight into system) and vice versa

1.2.2 Local operating context of this Standard

Hospitals and local authority social services teams choose how to send and receive ADW Notices /acknowledgements, according to their local digital capability and IT systems. This means that the information could be sent via:

- Non electronic format: letter; fax
- Electronic format:
 - Form attached to secure email*
 - Shared 'referral' system
 - CDA messaging*⁶

**Note: Where a hospital using secure email shares information with social services using CDA messaging, the 'adapter' software bridges the technology gap and allows the information to flow between these two modes of message transport (see 1.2.1).*

To facilitate use of the Information Standard, HSCIC has created compliant electronic forms and CDA messages which may be used by hospitals and social services teams.

2. Implementation Plan

2.1 Overview

The implementation plan sets out the activities and timescales for the adoption of the ADW Information Standard, stating that Trusts and local authorities are accountable for achieving full conformance by 31st March 2018. The approach to implementation is explained, detailing the enablers and monitoring mechanisms being deployed by HSCIC, in order to support Trusts and local authorities to use the Information Standard effectively. HSCIC will assess conformance and this will be reflected in the Post Implementation Review.

⁶ The HL7 Clinical Document Architecture (CDA) is a document mark-up standard that specifies the structure and semantics of "clinical documents" for the purpose of information exchange between health/social care providers. A CDA message can contain any type of clinical content and is carried in a human readable format. The messages that have been developed by HSCIC for the ADW Notices include a CDA component (which is machine readable) and also a structured data component (which is machine processable).

2.2 Impacted Users

The impacted users of this Information Standard are as described in Table 1.

Table 1. Impacted users of the Information Standard

Impacted user	Impact
Hospital	
IT staff	Support the maintenance of local IT systems and network connections which enable messages to be received/sent (email systems and mailboxes, CDA messages). Maintain appropriate Information Governance (IG) controls.
Discharge co-ordinator / ward administrator	May be named hospital liaison contact on Notices, so will be contact point for social services. Responsible for populating and sending Notices to social services.
Lead clinician on ward	May be named as Lead clinician on Notices.
Ward managers	Arrange/oversee any staff training required to facilitate local adoption.
Local authority	
IT staff	Support the maintenance of local IT systems and network connections which enable messages to be received/sent (email systems and mailboxes, CDA messages). Maintain appropriate IG controls.
Social care assessment administrator	Receive the Notices to arrange/cancel social care assessments and transfer patient details into social services case management systems. Send Notice Receipts so hospital knows the Notices have been received and accepted.
Social workers and Occupational Therapists	Use the information on the Notices to inform their social care assessments.
Patients	
Patients / citizens	This is an existing discharge process, but the new Notices require information from the patient e.g. recording of consent to Notices recorded on Assessment Notice.
Carers	Carers' contact details may be required (optional data item), and will be sent to social services (e.g. so they can be present at the social care assessment).
IT systems suppliers	
IT systems suppliers	For a Trust and local authority to be compliant with the Information Standard, their supplier's IT products must support the data sets defined in it.

3. Frequently asked questions

The following frequently asked questions set out general guidance which will be useful for end users at hospitals and local authorities, as well as IT system suppliers and patients / Adult Social Care users.

What is an Information Standard?

Information Standards are products which assist the collection, management and sharing of health and social care information to support an individual's care. Putting an information standard into place means that for those organisations which use them, there is a clear and common way of sending and receiving agreed information in a structured format. They may be used by hospitals, GP practices, local authorities and care homes for example.

The Health and Social Care Information Centre⁷ (HSCIC) develops Information Standards for use across England. Before an Information Standard can be agreed for use nationally, it must go through an assurance process to ensure that it is fit for purpose. The Standardisation Committee for Care Information (SCCI) has delegated authority from the National Information Board to accept Information Standards and Collections for health and social care. This review process is the formal means to gain approval from the Secretary of State and NHS England.

What is the purpose of these Notices?

This set of Notices is sent from an acute hospital to the local authority's adult social services department, to inform them that an adult to be discharged from the hospital needs a care and support assessment.

The purpose of the Notices is to ensure a timely care and support assessment is triggered, and that information required by the social services department is received to facilitate this.

What is the care scenario this Information Standard relates to?

This Information Standard relates to the discharge process from hospital.

Currently hospitals must determine when it is safe to discharge a patient. Part of that decision making process requires hospital staff to determine whether a care and support assessment is likely to be required before they leave hospital care (so appropriate social care can be put in place to support the citizen on exit from hospital). If they suspect an assessment is required, hospital staff must notify the local authority's social services team. This is the local authority where that person is ordinarily resident (or if not known, the authority in which the hospital is based).

These notices do not apply to everyone being discharged:

- The notices apply to adults only
- Not every adult who is admitted to hospital will need care and support after discharge

⁷ HSCIC is the national provider of information, data and IT systems for health and social care. HSCIC is an executive non-departmental public body of the Department of Health. Please follow [link](http://www.hscic.gov.uk) for further information:

- Where the hospital does consider that the person has social care needs, they must consult with the patient and, where applicable, the carer. This is to avoid unnecessary assessments where, for example, the patient wishes to make private arrangements for care and support without the involvement of the local authority.

Why have the Notices been developed?

The Care Act 2014⁸ and related guidance⁹ legislates a minimum data set for inclusion in the notification process, requiring hospitals to use:

- **Assessment Notices**
 - The main objective is to inform social services that an assessment will be required, with expected discharge date if known.
 - The information contained in an assessment notification is intended to be minimal, both to reflect patient confidentiality requirements and to minimise bureaucracy – it is only the trigger for assessment and care planning.
- **Discharge Notices**
 - Where the NHS has issued an assessment notice, it must also give written notice to the local authority of the proposed date of the patient's discharge.
 - The NHS could not seek to recover any reimbursement from the local authority in respect of a patient's delayed transfer of care unless it has first issued both an assessment notice and a discharge notice.
 - This must be sent at least one day before the due discharge date.
- **Withdrawal Notices**
 - The NHS body which issued the discharge notice to a local authority may withdraw that discharge notice at any time, but must send the Notice as soon as possible after the withdrawal decision has been made.
 - A discharge notice must state the reason for withdrawal, which will usually be because it is unsafe to discharge the patient - for example because their hospital treatment has been postponed or their condition has deteriorated – but it may also be due to other reasons, such as the patient having decided to arrange their own care, or being resident in a different local authority.
- **Notice Receipt**
 - Whilst the Care Act does not explicitly dictate that a Notice Receipt is required, the Information Standard does include mandatory use of this data set.
 - This is sent from the local authority back to the hospital, to acknowledge receipt of an assessment, discharge or withdrawal notice. It does not serve as an on-going process for communication, for example this is not the mechanism for agreeing arrangements for the assessment, or confirming the outcome of an assessment.

⁸ Care Act: Section 74 – Schedule 3 Discharge of Hospital Patients with Care and Support Needs
<http://www.legislation.gov.uk/ukpga/2014/23/schedule/3/enacted>

⁹ Care Act 2014: Care and Support Statutory Guidance: Annex G: The process for managing transfers of care from hospital for patients with care and support needs.
<https://www.gov.uk/guidance/care-and-support-statutory-guidance>

Is this a new process?

The hospital's duty to inform social services that a patient may need social care support already exists. Previous legislation related to this flow – the Community Care (Delayed Discharges etc.) Act 2003. The Care Act 2014 supersedes this, and therefore the Notices replace what were previously known as 'Section 2s, Section 3s and Section 5s'.

When does this change take place?

- The Care Act 2014 dictates that the Notices are used from April 2015. Some hospitals and local authorities have already developed content and begun sharing it. Others may still be using the old 'Section 2s, 3s, and 5s'. It is the responsibility of each Trust to ensure that it discharges its duties in accordance with the Care Act 2014, so must review the associated information exchange.
- The Information Standard is due to be published by July 2016. This means that the minimum data set to be used in order to be compliant with the Care Act will be made available. This will be available on [the HSCIC website](#).
- There will be mechanisms to support system level integration including system to system messaging, and health and social care integration via the NHS 'Spine'¹⁰. These will be made available from October 2016.

Does the Standard dictate how the notices should be sent?

No. Whilst the Care Act stipulates that these Notices must be written notices, and the Information Standard dictates the minimum content of the data sets exchanged, it is a local decision for the hospital and local authority what:

- the format of the Notices should be (e.g. a physical hard copy form, or an electronic form integrated in their existing patient or case management system)
- the method of transmission should be (e.g. fax, secure email, CDA messaging).

Can the data set be changed to suit local information exchange requirements between hospitals and local authorities?

Locally it may be agreed that the forms should contain more information than the minimum prescribed in the Information Standard. Additional items may be added, but data items may not be taken out of the data set, nor changes made to whether the minimum data set items are 'mandatory' or 'required', or whether they are free text or 'yes/no' answers for example.

What needs to happen in order for this Information Standard to be implemented?Trusts and local authorities

i. Information Standard

The following documents are published on [the HSCIC's website](#):

- Requirements Specification (this includes the data set)
- Implementation Guidance (this document).

¹⁰ The Spine is a collection of national applications, services and directories which support the health and social care sector in the exchange of information in national and local IT systems. See link for further information: <http://systems.hscic.gov.uk/ddc/spine>

ii. Means of sending the data sets

If wanting to use NHS mail as the preferred secure email option:

- Information on accessing NHSmail at HSCIC website¹¹.

iii. Staff capability:

- Ensure staff are aware of the shift from the Community Care (Delayed Discharges etc.) Act 2003 to Care Act 2014, and understand the associated information sharing requirements between hospitals and local authorities.
- Consider whether training required to support use of the ADW Notices, in whatever technical form locally decided (Word form attached to email; CDA message, electronic form within shared system).

Suppliers

There will be separate technical guidance available for suppliers to implement messaging, either via the Adapter or point to point.

4. Organisational Guidance

4.1 End user implementation actions

Trusts and local authorities will need to consider and implement the points in Table 2 in order to adopt the Information Standard:

Table 2: Organisational guidance

Action	Applies to	Further information and advice where applicable
Update documentation		
Update the information being sent to local authorities, from the 'Section 2s, 3s, and 5s' under the Community Care (Delayed Discharges etc.) Act 2003, to the 'Assessment Discharge and Withdrawal Notices' under the Care Act 2014. The Notices entail use of a new data set which is compliant with the Care Act 2014 requirements.	Trust & LA	Information Standard published on HSCIC website http://www.hscic.gov.uk/isce/publication/scci2075

¹¹ <http://systems.hscic.gov.uk/nhsmail>

<p>Comply with data set:</p> <p>Additional items may be added to the core dataset prescribed in this Information Standard, should this be agreed locally between hospital and local authority partners. The data set will still be compliant with the Information Standard and the Care Act 2014. However, data items set out in this Information Standard must not be omitted, nor their attributes changed, such as whether the field is mandatory or how the data is formatted as this would render the dataset non compliant with the Information Standard, and may result in non compliance with the Care Act 2014.</p> <p>It should be noted that the addition of additional data items may mean that some technical implementation options are more limited, for example data sets that are not compatible with the national Adapter.</p>	<p>Trust & LA</p>	<p>Should users believe there is a case for proposing changes to the <i>national</i> data set, they can do this by contacting HSCIC’s Social Care Informatics Project at sci.adw@hscic.gov.uk, where it will be considered via the SCIP Maintenance Forum.</p>
<p>Technical solution</p>		
<p>Determine technical solution being used to transport the new data set e.g. secure email, CDA messaging, or use of shared system with the partner local authority’s social services team.</p>	<p>Trust & LA</p>	<p>Data set, guidance and other information supporting Information Standard implementation available at HSCIC website http://www.hscic.gov.uk/isce/publication/scci2075</p>
<p>i. Secure email</p>		
<p>(Optional) Use HSCIC produced Information Standard compliant word forms for each Notice, and Notice Receipt, for use as</p>	<p>Trust & LA</p>	<p>Word forms can be requested by emailing sci.forms@hscic.gov.uk</p>

attachment to secure email.		
Ensure secure email mailbox for sending/receiving, and destination mailbox address.	Trust & LA	Information on accessing NHSmail at HSCIC website http://systems.hscic.gov.uk/nhsmail .
ii. CDA messaging		
<p><i>Explanatory note:</i></p> <p><i>The HL7 Clinical Document Architecture (CDA) is a document mark-up standard that specifies the structure and semantics of "clinical documents" for the purpose of information exchange between health/social care providers. A CDA message can contain any type of clinical content and is carried in a human readable format. The messages that have been developed by HSCIC for the ADW Notices include a CDA component (which is machine readable) and also a structured data component (which is machine processable).</i></p> <p><i>CDA messaging has several benefits:</i></p> <ul style="list-style-type: none"> • <i>Ability to share information in a structured way across organisations</i> • <i>Real-time information automatically input into the social care management system</i> • <i>Automatic acknowledgements to be sent back to the acute trusts from LAs</i> • <i>Minimal manual data entry</i> • <i>Good quality, legible patient information is shared and captured</i> • <i>System support and statistical reporting</i> 		
Ensure supplier uses CDA specification	Supplier	Supplier to use the HSCIC website to access CDA specifications https://isd.hscic.gov.uk/trud3/user/guest/group/0/home
Determine whether use of the Adapter is required (see iii).		
iii. Adapter middleware		
<p><i>Explanatory note:</i></p> <p><i>The National Adapter is a middleware solution provided by the HSCIC, which enables adult social care case management systems which can support Clinical Document Architecture (CDA) messaging, to integrate with NHS and other clinical care record systems which are not using CDA. This enables secure real-time system to system communications in support of transfers of care, and essentially bridges the interoperability gap between organisations using different technical solutions. The Adapter will be available via the internet without the need for a 'N3' connection.</i></p>		
Agree between Trust and LA to configure for Adapter use.	Trust & LA	

Register for the Adapter via the Messaging Exchange for Social Care and Health (MESH) software. This will provide a platform for messaging other users and systems. This will require sign up to a HSCIC data processing agreement.	Trust & LA / IT supplier	MESH registration via HSCIC website http://systems.hscic.gov.uk/ddc/mesh/client/index_html MESH information at HSCIC website http://systems.hscic.gov.uk/ddc/mesh
iv. Shared system		
Ensure electronic data entry form used in a shared system between Trusts and local authorities' social services team, is compliant with data set.	Trust & LA	Information Standard published on HSCIC website http://www.hscic.gov.uk/isce/publication/scci2075
Information Governance		
Consider IG requirements for chosen technical solution (e.g. secure email, CDA messaging). This will include completion of the IG toolkit and updating any local Information Sharing Agreements with the partner acute trust / local authority.	Trust & LA	See Information Governance Toolkit at HSCIC website https://www.igt.hscic.gov.uk/ Further guidance on information sharing in health and social care can be found at the Centre of Excellence for Information Sharing website http://informationsharing.org.uk/
Staff capability		
Ensure staff are aware of the shift from the Community Care (Delayed Discharges etc.) Act 2003 to Care Act 2014, and understand the associated information sharing requirements between hospitals and local authorities. Consider whether training required to support use of the ADW Notices, in whatever technical form locally decided (word form attached to email; CDA message, electronic form within shared system).		See the Care Act 2014 Care and Support Guidance, Annex G, for further information https://www.gov.uk/guidance/care-and-support-statutory-guidance

4.2 End user guidance on completing the dataset

Table 3 provides guidance to end users at hospitals and local authorities on the datasets involved in each Notice.

Please note the following:

- i. Full guidance on the Care and Support (Discharge of Hospital Patients) Regulations 2014 is available¹² and should be read in parallel with this guidance, which is focused on the specifics of the dataset, rather than the care process and more general requirements of the Care Act 2014 in relation to this discharge process.
- ii. The Requirements Specification, published on the [HSCIC website](#)¹³, lists the data set items in their entirety and provides detail on the business flow .
- iii. This guidance does not instruct the end user on the completion of every data item: - it is intended to offer guidance on aspects of the dataset which require particular explanation. The majority of the data items are self explanatory.
- iv. Where data items in the Assessment Notice are repeated in other Notices, the explanation under the Assessment Notice should be applied.
- v. This is 'logical model' guidance only. Guidance on the technical implementation of the dataset will be made available as technical products are made available. This will include guidance on enabling system to system messaging, and on health and social care integration via the 'NHS Spine'.

¹² Care Act 2014: Care and Support Statutory Guidance: Annex G: The process for managing transfers of care from hospital for patients with care and support needs.

<https://www.gov.uk/guidance/care-and-support-statutory-guidance>

¹³ <http://www.hscic.gov.uk/isce/publication/scci2075>

Table 3: Organisational guidance

Data Item	Note
Assessment Notice	
NHS Number	<p>The NHS Number, as a recognised national identifier, is a 'required' data item. This means that it must be inserted where it is known. Every effort should be made to get the NHS No. of the patient. This should not unduly hold up the sending of the Notice however.</p> <p>The Notice can be sent without the NHS Number, but it should be noted that in this instance the Notice would not comply with Care Act 2014 requirements.</p>
Patient Consultation Indicator	<p>The Care Act 2014 requires that patients are consulted in relation to the Notice and that this is recorded.</p> <p>If the patient has not been consulted, the Notice cannot be sent.</p> <p>Note: There is a separate data item to record whether the patient has <i>consented</i> to the sending of the Notice.</p>
Carer Consultation Indicator	<p>The Care Act 2014 requires that where applicable and feasible, the carer should be consulted in relation to the Notice, and that this is recorded.</p> <p>This is in-keeping with the Act's drive to achieve inclusive and person centred care that involves carers where appropriate.</p> <p>The Notice can be sent whether or not the carer has been consulted.</p>
Patient Consent Indicator	<p>Consent to the giving of the Notice must be gained from the patient in order for the Assessment Notice to be sent. If patient consent is not given, the Notice cannot be sent.</p> <p>In cases where the patient does not have the mental capacity to give consent, consent may be given on behalf of the patient (see 'Third Party Consent Source' below).</p>
Third Party Consent Source	<p>Consent can only be given on behalf of a patient where they do not have mental capacity, and</p> <ul style="list-style-type: none"> i. someone else is acting as the patient's legal representative* for the adult (which may be the carer), or ii. where a 'best interest' decision has been taken by a professional in the hospital. (Note: this does not have to be the same person as identified under 'Lead Clinician Name') <p>See Mental Capacity Act 2005 guidance for further information: https://www.gov.uk/government/publications/mental-capacity-act-code-of-practice</p> <p><i>*Under the MCA, someone could be made a patient's legal</i></p>

	<p><i>representative for example:</i></p> <ul style="list-style-type: none"> • <i>as a recipient of a lasting power of attorney granted by the patient</i> • <i>as a deputy appointed by the Court of Protection</i>
Carer Contact Details	<p>The carer's contact details may be used by the local authority's Social Services team as an additional means of contacting the patient, or including the carer in the care and support assessment process. Their details may also be used by the local authority's Social Services team to check whether a carer support assessment is required.</p> <p>The Care Act 2014 (paragraph 53 of Annex G) specifies that:</p> <p><i>"The exchange of data needed for the purposes of NHS bodies and local authorities carrying out their respective functions is allowed in accordance with the common laws of confidentiality and data protection legislation. It is the responsibility of the individual bodies to ensure they have robust data protection safeguards in place to ensure a patient's personal data is kept secure and only used for the purposes that it is required (i.e. seen by those it needs to be seen by on a needs to know basis)".</i></p>
Local Authority Organisation Code	<p>This data item should be included where known. A standard set of unique identification codes for local authorities can be gained via the following link:</p> <p>http://systems.hscic.gov.uk/data/ods/datadownloads/nonnhs</p>
Discharge Notice	
Proposed Discharge Date	The discharge date entered may be a different date to that indicated on the Assessment Notice.
Discharge Date Patient Informed Indicator	The patient must be informed of their proposed discharge date. The Care Act 2014 requires that this is recorded.
Discharge Date Carer Informed Indicator	The Care Act 2014 indicates that where appropriate, the carer should be informed of the patient's proposed discharge date.
Withdrawal Notice	
Reason For Withdrawal	<p>There may be several reasons to withdraw the Assessment or Discharge Notices.</p> <p>The Care Act 2014 (paragraphs 35 & 36, Annex G) specifies that:</p> <p><i>"A discharge notice must be withdrawn where the NHS body considers that it is no longer likely to be safe to discharge the patient from hospital on the proposed discharge date.</i></p> <p><i>However, this does not apply where the reasons for withdrawal are that the local authority has not taken the steps required to inform the NHS body of the outcome of the assessment the</i></p>

	<i>needs of the patient (and the carer, where applicable), and whether it intends to put in place care and support to meet any eligible needs.”</i>
Notice of Receipt	
Response Type	<p>The local authority’s Social Services team can accept or reject the Assessment, Discharge or Withdrawal Notices. This relates purely to whether the Notice is valid. Reasons for invalid Notices include:</p> <ul style="list-style-type: none"> • the Notice not having been sent to the right local authority • the Notice not containing the mandatory information required by this Information Standard. <p>Note: the ‘accept/reject’ response does not relate to any decisions taken by the Social Services team about the assessment, or any outcomes thereof.</p>

Additional data items

Additional items may be added to the core data set prescribed in this Information Standard, should this be agreed locally between hospital and local authority partners. The data set will still be compliant with the Information Standard and the Care Act 2014. However, data items set out in this Information Standard must not be omitted, nor their attributes changed, such as whether the field is mandatory or how the data is formatted as this would render the data set non compliant with the Information Standard, and may result in non compliance with the Care Act 2014.

It should be noted that the addition of additional data items may mean that some technical implementation options are more limited, for example datasets that are not compatible with the national Adapter.

Timescales

The Care Act 2014 dictates certain timescales in relation to the sending of these Notices. Please refer to the Care and Support Guidance to ensure legal compliance in terms of the processing of these Notices, and to fully understand the implications of not doing so with regard to delayed discharge and associated cost reimbursement.

5. IT Suppliers Guidance

Guidance is available for IT system suppliers at Appendix A. This covers:

- Which suppliers this Information Standard applies to
- The care context this Information Standard applies to
- What an Information Standard is
- What suppliers will need to do
- Sources of advice and guidance for suppliers.

6. Patients and Carers Guidance

Guidance for patients and carers is available at Appendix B. This covers:

- The aspect of a patient's care this Information Standard relates to
- What an Information Standard is and how it supports effective care delivery
- The information that will be shared about a patient
- What patients will need to do.

7. Conformance Criteria Monitoring

7.1 Trusts and local authorities

In line with the 2020 National Information Board (NIB) vision, and under their workstream on social care digitisation, it is expected that hospitals and local authorities will be compliant with the Information Standard. The SCIP team are exploring options to support compliance, in terms of how organisations are monitored and what levers are available to enforce compliance. These options include:

- Developing a dialogue with NHS Improvement, Care Quality Commission (CQC), NHS England and the Local Government Association (via NIB Programme Local Digital Maturity assessment) on monitoring regimes and performance indicators
- Exploring the feasibility of monitoring returns from local authorities via channels already established in the HSCIC Adult Social Care Data Collections team
- Producing a bespoke annual survey to be sent from SCIP.

7.2 IT suppliers

No contractual relationship exists between HSCIC IT system suppliers, but in order for them to update their products to be compliant with the Information Standard, suppliers will need to use the CDA message specification created, or ensure the information exchange enabled on their shared systems¹⁴ complies with the data set. HSCIC are working directly with all of the social care suppliers¹⁵ and establishing a joint development plan – essentially a digital roadmap which will support suppliers to prepare for and use products related to Information Standard adoption (see supplier guidance).

¹⁴ Some hospitals share IT systems with local authorities. In these instances there is still a data set, but it is not 'sent' to a different organisation, rather it is a type of referral between system users.

¹⁵ Whilst supplier engagement will initially focus on social care system suppliers, eventually it is planned that joint development plans will also be produced with suppliers to health care.

Appendix A – Supplier Guidance

Which IT suppliers does this Information Standard relate to?

The following guidance is for IT system suppliers, i.e. suppliers of:

- i) patient administration systems in hospitals (NHS hospitals and independent hospitals providing services on behalf of the NHS)
- ii) case management systems in local authority social services teams

What is the care scenario this Information Standard relates to?

This Information Standard relates to the discharge process from hospital.

Currently hospitals must determine when it is safe to discharge a patient. Part of that decision making process requires hospital staff to determine whether a care and support assessment is required before they leave hospital care (so appropriate social care can be put in place to support the citizen on exit from hospital). If they suspect an assessment is required, hospital staff must notify the local authority's (LA) social services team.

The Care Act 2014¹⁶ and related guidance¹⁷ legislates a minimum dataset for inclusion in that notification process, requiring hospitals to use:

- Assessment Notices
Informs the social services team that an assessment will be required, with expected discharge date if known
- Discharge Notices
Confirms discharge date to social services
- Withdrawal Notices
To withdraw either or both of the above

The purpose of the Notices is to ensure a timely care and support assessment is triggered, and that information required by the social services department is received to facilitate this. Previous legislation related to this flow – the Community Care (Delayed Discharges etc.) Act 2003. The Care Act 2014 supersedes this, and therefore the Notices replace what were previously known as 'Section 2s, Section 3s and Section 5s').

What is an Information Standard?

Information Standards are products which assist the collection, management and sharing of health and social care information to support an individual's care. Putting an information standard into place means that for those organisations which use them, there is a clear and common way of sending and receiving agreed information in a structured format. They may be used by hospitals, GP practices, local authorities and care homes for example.

¹⁶ Care Act: Section 74 – Schedule 3 Discharge of Hospital Patients with Care and Support Needs

<http://www.legislation.gov.uk/ukpga/2014/23/schedule/3/enacted>

¹⁷ Care Act 2014: Care and Support Statutory Guidance: Annex G: The process for managing transfers of care from hospital for patients with care and support needs.

<https://www.gov.uk/government/publications/care-act-2014-statutory-guidance-for-implementation>

The Health and Social Care Information Centre (HSCIC) establishes and approves Information Standards for use across England. Before an Information Standard can be agreed for use nationally, it must go through an assurance process to ensure that it is fit for purpose. The Standardisation Committee for Care Information (SCCI) has delegated authority from the National Information Board to accept Information Standards and Collections for health and social care. This review process is the formal means to gain approval from the Secretary of State and NHS England.

What will suppliers need to do?

The actions taken by IT suppliers will depend on the mode chosen to transport the message. Hospitals and local authority Social Services teams can choose to send and receive the Notices and associated Notice receipt by post, fax, email or CDA message.

Secure email

Where this option for transporting the Notices is used, there is no action required from the supplier. However, it may be helpful for the supplier to signpost the end user to the ADW Notices form registration service (sci.forms@hscic.gov.uk) in order that end users gain access to a Word form which has been created for use as an attachment to secure email. This requires a commitment from Trusts to supply a limited amount of monitoring information on their use of the Information Standard.

CDA messaging

Where this option for transporting the message is used, the supplier will need to:

- i. Understand the care scenario (above), and understand and have access to user requirements and the dataset. These are on the [HSCIC website](#)¹⁸.
- ii. Implement the CDA message specification. The supplier will need to download the Health and Social Care Integration Domain Message Specification (DMS) from the [HSCIC Technology Reference data Update Distribution](#)¹⁹ (TRUD) website pages.
- iii. (where using the National Adapter²⁰) Register for Messaging Exchange for Social Care and Health (MESH) software via sci.adapter@hscic.gov.uk. This will provide a platform for messaging other systems. Information about MESH can be found via the [HSCIC website](#)²¹. This will require sign up to a HSCIC data processing agreement.

¹⁸ <http://www.hscic.gov.uk/isce/publication/standards>

¹⁹ <https://isd.hscic.gov.uk/trud3/user/guest/group/0/home>

²⁰ *The Adapter is a middleware solution provided by the HSCIC, which enables adult social care case management systems which can support Clinical Document Architecture (CDA) messaging, to integrate with NHS and other clinical care record systems which are not using CDA. This enables secure real-time system to system communications in support of transfers of care.*

²¹ <http://systems.hscic.gov.uk/ddc/mesh>

Further information

HSCIC are working directly with all of the social care suppliers²² and establishing a joint development plan – essentially a digital roadmap which will support suppliers to prepare for and use products related to Information Standard adoption. This will be the primary mechanism through which to address any forward planning or implementation queries, and through which on-going support will be offered.

Should suppliers have any queries that cannot be addressed via this route, they may contact sci.general@hscic.gov.uk.

Superseded

²² Whilst supplier engagement will initially focus on social care system suppliers, eventually it is planned that joint development plans will also be produced with suppliers to health care.

Appendix B – Patient and Carer Guidance

Which part of my care does this Information Standard relate to?

This Information Standard relates to the discharge process from hospital.

Currently hospitals must determine when it is safe to discharge a patient. Part of that decision making process requires hospital staff to determine whether a care and support assessment is required before they leave hospital care (so appropriate social care can be put in place to support the citizen on exit from hospital). If they suspect an assessment is required, hospital staff must notify the local authority's (LA) social services team, with consent from the patient.

The [Care Act 2014](#)²³ and related [guidance](#)²⁴ legislates a minimum dataset for inclusion in that notification process, requiring hospitals to use:

- **Assessment Notices**
Informs the social services team that an assessment will be required, with expected discharge date if known
- **Discharge Notices**
Confirms discharge date to social services
- **Withdrawal Notices**
To withdraw either or both of the above

The purpose of the Notices is to ensure a timely care and support assessment is triggered, and that information required by the social services department is received to facilitate this. Previous legislation related to this flow – the Community Care (Delayed Discharges etc.) Act 2003. The Care Act 2014 supersedes this, and therefore the Notices replace what were previously known as 'Section 2s, Section 3s and Section 5s').

What is an Information Standard?

Information Standards are products which assist the collection, management and sharing of health and social care information to support an individual's care. Putting an information standard into place means that for those organisations which use them, there is a clear and common way of sending and receiving agreed information in a structured format. They may be used by hospitals, GP practices, local authorities and care homes for example.

The Health and Social Care Information Centre²⁵ (HSCIC) establishes and approves Information Standards for use across England. Before an Information Standard can be agreed for use nationally, it must go through an assurance process to ensure that it is fit for purpose. The Standardisation Committee for Care Information (SCCI) has delegated authority from the National Information Board to accept Information Standards and

²³ Care Act: Section 74 – Schedule 3 Discharge of Hospital Patients with Care and Support Needs

<http://www.legislation.gov.uk/ukpga/2014/23/schedule/3/enacted>

²⁴ Care Act 2014: Care and Support Statutory Guidance: Annex G: The process for managing transfers of care from hospital for patients with care and support needs.

<https://www.gov.uk/guidance/care-and-support-statutory-guidance>

²⁵ HSCIC is the national provider of information, data and IT systems for health and social care. Please follow [link](#) for further information. HSCIC is an executive non-departmental public body of the Department of Health.

Collections for health and social care. This review process is the formal means to gain approval from the Secretary of State and NHS England.

How will it deliver effective care for me?

The Information Standard ensures hospitals tell Social Services the information they need to know in order to arrange a social care assessment. A delay in getting the right information from the hospital may result in delayed assessments, which could delay discharge. The objective is to put an appropriate package of social care in place to meet a patient's on-going needs, and prevent a person having to be in hospital longer than they need to.

What kind of information about me will be shared?

The hospital needs to tell Social Services your personal details including your name, gender, date of birth, address and NHS number. They will also record:

- Whether you have consented to the Assessment Notice. (Your consent may be sought from someone acting on your behalf as your legal representative where you do not have mental capacity to consent)
- Whether there is a safeguarding issue (the nature of this issue will not be recorded, it will just be flagged that there is something Social Services should consider with regard to your ability to live free from harm, abuse and neglect)
- (In the case of the Discharge Notice) whether you have been informed of your discharge date
- (In the case of a Withdrawal Notice) The reason why the Assessment or Discharge Notices has been withdrawn. For example the hospital could inform Social Services that your health has deteriorated and therefore you are being kept in hospital, or that you have chosen to arrange your own social care.

The hospital *may* also record:

- Your telephone number and email address
- The name and contact details of your carer
- Your preferred language
- The reason for your admission

Will I need to do anything?

The main thing you will need to do is give consent to the sending of the Assessment Notices. You may also be asked for other information so the hospital can complete other sections of the Notice, such as contact details for any carer you have.

I am a carer for the patient being discharged from hospital, what do I need to know?

Where feasible, the hospital will consult you as well as the person you are caring for about the sending of the Assessment Notice, as part of an inclusive approach to person-centred care.

Where the person you care for has not got mental capacity to consent to Assessment Notice, you may consent on their behalf if you are their legal representative.

Your contact details may be recorded in the Assessment Notice. They may be used by the local authority's ASC team as an additional means of contacting the person you care for. They may also be used to see if you need a carer's assessment. This will identify whether you require support as part of your caring role, and involve you in determining what that support will include. When the Discharge Notice is issued, where feasible the hospital will inform you of the discharge date for the person you care for.