

Patient Handling Assessment and Safer Handling Plan Information Standards Specification

User Interface Name	Field Identifier	Definition	Data Display Format	Data Value Format (code or other value)
Review of the assessment should be carried out as a minimum weekly or more frequently if there is a deterioration or change in the patient's condition or following an incident or fall.				
The Patient Handling Risk Assessment & Safer Handling Plan MUST be communicated / sent with the patient to other wards / departments				
Date of Assessment	Assessment_Date	This is the date the actual risk assessment (or review) was carried out with the patient	Short Date Format In all instances of clinical usage affecting patient treatment, including patient identification, NHS applications must display dates as short dates in the form DD-MMM-YYYY, where: DD is the two-digit day MMM is the correctly abbreviated month name YYYY is the four-digit year Exact times display both hours and minutes, but may optionally also display seconds. The required format is HH:mm:ss (this notation follows the .NET Framework Standard DateTime Format Strings specification).	8 digit numeric, CCYYMMDD 6 digit numeric: hh:mm:ss
Overall Mobility Classification	Mobility_Classification	This is to indicate the patients overall mobility classification	Radio Button (Multiple Options)	
Fully Independent	Fully_Independent	This is to indicate whether the patient is fully independent	Radio Button (Yes No)	n1
Risk of Falls	Falls_Risk	This is to indicate whether the patient is at risk of falls	Radio Button (Yes No)	n1
Weighed	Weighed	This is to indicate that the patients weight was calculated from the patient being weighed on scales	Radio Button (Multiple Options)	
Estimated	Estimated	This is to indicate that the patients weight is an estimated weight	Radio Button (Multiple Options)	
Patient reported	Patient_reported	This is to indicate that the patients weight was the weight reported by the patient	Radio Button (Multiple Options)	
Sensory Factors	Sensory_Factors	This is to indicate whether the patient has a hearing or sight deficit and wears hearing aids	Radio Button (Multiple Permitted)	n1
Manual Handling Risk Factors / Constraints	Risk_Factors_Constraints	This is to identify any other factors that could affect the patients mobility, and/or impact on patient safety or safety of the carer.	Radio Button (Multiple Permitted)	n1
Moving in bed (i.e. rolling, turning & up/down bed)				

Rolling / Turning	Rolling_Turning_In_Bed	This is to indicate whether the patient requires supervision or assistance with rolling / turning in bed or is able to move independently	Radio Button (Multiple Permitted)	n1
Up / down bed	Up_Down_In_Bed	This is to indicate whether the patient requires supervision or assistance with moving up/down the bed or is able to move independently	Radio Button (Multiple Permitted)	n1
Equipment (if required)	Moving_In_Bed_Equipment	This is to indicate whether the patient requires equipment to move in bed	Tick Box	n1
Staff	Staff_moving_in_bed	This is to indicate how many staff are required to move the patient in bed.	Radio Button (Multiple Permitted)	n1
Supine <-> Sitting on edge of bed				
Bed Rest	Bed_rest	This is to indicate whether the patient is on bed rest and requires equipment to move	Radio Button (Multiple Permitted)	n1
Supine to sitting on edge of bed	Suppine_to_sittingonedgeofbed	This is to indicate whether the patient requires supervision or assistance from being in supine position to sitting on the edge of the bed or if they can move independently	Radio Button (Multiple Permitted)	n1
Sitting on edge of bed to supine	Sittingonedgeofbed_to_suppine	This is to indicate whether the patient requires supervision or assistance in stting on the edge of the bed to supine or if they can move independently	Radio Button (Multiple Permitted)	n1
Staff	Staff_suppine	This is to indicate how many staff are required to move patient from supine to sitting on the edge of bed	Radio Button (Multiple Permitted)	n1
Showering	Showering	This is to indicate whether the patient is able to shower independently or whether they require assistance or supervision	Radio Button (Multiple Permitted)	n1
Equipment	Showering_Equipment	This is to indicate whether the patient requires equipment to shower	Radio Button (Multiple Permitted)	n1
Staff	Showering_Staff	This is to indicate how many staff are required to assist with showering the patient	Radio Button (Multiple Permitted)	n1
Bathing	Bathing	This is to indicate whether the patient is able to bathe independently or whether they require assistance or supervision	Radio Button (Multiple Permitted)	n1
Equipment	Bathing_Equipment	This is to indicate whether the patient requires equipment to bathe	Radio Button (Multiple Permitted)	n1
Bath sling sizes	Bath_sling_sizes	This is to indicate what size bathing sling is being used	Radio Button (Multiple Permitted)	n1
Staff	Staff	This is to provide additional information with regards to bathing the patient	Radio Button (Multiple Permitted)	n1
Washing	Washing	This is to indicate whether the patient is able to wash independently or whether they require assistance or supervision	Radio Button (Multiple Permitted)	n1
Equipment	Washing_equipment	This is to indicate whether the patient requires equipment to wash	Radio Button (Multiple Permitted)	n1

Staff	Staff	This is to indicate how many staff are required to assist with washing the patient	Radio Button (Multiple Permitted)	n1
Toileting	Toileting	This is to indicate whether the patient is able to go to the toilet independently or whether they require assistance or supervision	Radio Button (Multiple Permitted)	n1
Equipment	Toileting_Equipment	This is to indicate whether the patient requires equipment for toileting	Radio Button (Multiple Permitted)	n1
Staff	Staff	This is to indicate how many staff are required to assist with toileting the patient	Radio Button (Multiple Permitted)	n1
Walking	Walking	This is to indicate whether the patient is able to walk independently or whether they require assistance or supervision	Radio Button (Multiple Permitted)	n1
Equipment	Walking_Equipment	This is to indicate whether the patient requires equipment for walking	Radio Button (Multiple Permitted)	n1
Staff	Staff	This is to indicate how many staff are required to assist the patient with walking	Radio Button (Multiple Permitted)	n1
All transfers (i.e. to/from bed, chair, commode, toilet etc)		This is to indicate whether the patient requires assistance or supervision for all transfers or is able to do so independently	Radio Button (Multiple Permitted)	n1
Equipment	All_transfers_equipment	This is to indicate whether the patient requires equipment for all transfers	Radio Button (Multiple Permitted)	n1
Hoist	Hoist	This is to indicate whether the patient uses a hoist	Radio Button	n1
Sling size	Sling_size_activestanding_hoist	This is to detail the size of the sling in use for the active / standing hoist	Radio Button (Multiple options)	n1
Sling size	Sling_size_passive_hoist	This is to detail the size of the sling in use for the passive hoist	Radio Button (Multiple options)	n1
Staff	Staff_alltransfers	This is to indicate how many staff are required to hoist the patient	Radio Button (Multiple Permitted)	n1
Other Specific Risks e.g. environmental, equipment or task-related etc.				
Additional Resources Required				
Manager Name	Manager_name	This is the name of the manager who has authorised the additional resource		
Date Requested	Date_requested	This is the date the additional resource was requested	Short Date Format In all instances of clinical usage affecting patient treatment, including patient identification, NHS applications must display dates as short dates in the form DD-MMM-YYYY, where: DD is the two-digit day MMM is the correctly abbreviated month name YYYY is the four-digit year	8 digit numeric, CCYYMMDD 6 digit numeric: hh:mm:ss
Date Provided	Date_provided	This is the date the additional resource was provided	Short Date Format In all instances of clinical usage affecting patient treatment, including patient identification, NHS applications must display dates as short dates in the form DD-MMM-YYYY, where: DD is the two-digit day MMM is the correctly abbreviated month name YYYY is the four-digit year	8 digit numeric, CCYYMMDD 6 digit numeric: hh:mm:ss

Value Sets	Business Rules	Additional Information/definitions/formats	Source	SNOMED CT
A B C D E	Need to display pictures / icons. These should be visible at all times			
1 - Patient is fully independent 2 - Patient isn't fully dependent	If field id "fully_independent" = 1 do not need to continue with assessment			
1 - Yes risk of falls 2 - No risk of falls	Only display if field id 'fully_independent' = 2			
	Only display if field id 'fully_independent' = 2			
	Only display if field id 'fully_independent' = 2			
	Only display if field id 'fully_independent' = 2			
1 - Hearing deficit 2 - Hearing Aid 3 - Sight deficit 4 - Spectacles	Only display if field id 'fully_independent' = 2 These will be pulled through from the Communications Care Domain			15188001 Hearing loss (disorder) 6012004 Hearing aid, device (physical object) 7973008 Abnormal vision (finding) 50121007 Eye glasses, device (physical object)
1 - Lack of comprehension / understanding 2 - Has confusion / agitation 3 - Lack of co-operation / compliance 4 - Skin lesions / wounds 5 - Disability 6 - Weakness 7 - Pain 8 - Infusion / catheter / drain etc. 9 - Cultural considerations 10 - Other e.g. traction, limb oedema (state)	Only display if field id 'fully_independent' = 2 If field id "risk_factors_constraints" = 11 - Other allow for recording of details			

1 - Independent 2 - Supervision / verbal prompt 3 - Assisted 4 - N/A	Only display if field id 'fully_independent' = 2			
2 - Independent 2 - Supervision / verbal prompt 3 - Assisted 4 - N/A	Only display if field id 'fully_independent' = 2			
1 - Slide sheets 2 - Grab handle 3 - Other	Only display if field id 'fully_independent' = 2			
0 1 2 3 Other	Only display if field id 'fully_independent' = 2			
1 - Slide sheets 2 - Grab handle 3 - Leg lifter	Only display if field id 'fully_independent' = 2			17535004 Lying in bed (finding) Bed rest
1 - Independent 2 - Supervision / verbal prompt 3 - Assisted 4 - N/A	Only display if field id 'fully_independent' = 2			
1 - Independent 2 - Supervision / verbal prompt 3 - Assisted 4 - N/A	Only display if field id 'fully_independent' = 2			
1 2 3 Other	Only display if field id 'fully_independent' = 2			
1 - Independent 2 - Supervision / verbal prompt 3 - Assisted 4 - N/A	Only display if field id 'fully_independent' = 2			
1 - Hi-low hygiene chair 2 - Fixed height shower chair 3 - Shower Trolley	Only display if field id 'fully_independent' = 2			
1 2 3 Other	Only display if field id 'fully_independent' = 2			
1 - Independent 2 - Supervision / verbal prompt 3 - Assisted 4 - N/A	Only display if field id 'fully_independent' = 2			
1 - Bath / Hi-low bath 2 - Bath trolley / hoist 3 - Hoist & sling	Only display if field id 'fully_independent' = 2			
1 - S 2 - M 3 - L 4 - LL 5 - XL	Only display if field id 'fully_independent' = 2			
1 2 3 Other	Only display if field id 'fully_independent' = 2			
1 - Independent 2 - Supervision / verbal prompt 3 - Assisted 4 - N/A	Only display if field id 'fully_independent' = 2			
1 - Bed / assisted wash 2 - Chair	Only display if field id 'fully_independent' = 2			

1 2 3 Other	Only display if field id 'fully_independent' = 2			
1 - Independent 2 - Supervision / verbal prompt 3 - Assisted 4 - N/A	Only display if field id 'fully_independent' = 2			
1 - Toilet 2 - Commode 3 - Bedpan	Only display if field id 'fully_independent' = 2			
1 2 3 Other	Only display if field id 'fully_independent' = 2			
1 - Independent 2 - Supervision / verbal prompt 3 - Assisted 4 - N/A	Only display if field id 'fully_independent' = 2			
1 - Walking stick 2 - Walking Frame 3 - Walking Hoist	Only display if field id 'fully_independent' = 2			
1 2 3 Other	Only display if field id 'fully_independent' = 2			
1 - Independent 2 - Supervision / verbal prompt 3 - Assisted 4 - N/A	Only display if field id 'fully_independent' = 2			
1 - Standing turntable 2 - Standing aid 3 - Bed assist, stand 4 - Transfer board	Only display if field id 'fully_independent' = 2			
1 - Active / standing hoist 2 - Passive hoist	Only display if field id 'fully_independent' = 2			
1 - S 2 - M 3 - L 4 - XL	Only display if field id 'fully_independent' = 2			
1 - S 2 - M 3 - L 4 - LL 5 - XL	Only display if field id 'fully_independent' = 2			
1 2 3 Other	Only display if field id 'fully_independent' = 2			