# Change Request

## **NHS** Connecting for Health

## **NHS Data Model and Dictionary Service**

Reference: Change Request 1225

Version No: 1.0

**Subject:** Practitioners with Special Interests

Effective Date: Immediate

Reason for Change: New NHS Business Definitions

Publication Date: 14 February 2011

## Background:

This Data Dictionary Change Notice (DDCN) introduces and updates the following definitions in the NHS Data Model and Dictionary:

- Practitioner with a Special Interest
- General Practitioner with a Special Interest
- · Dentist with a Special Interest
- Faculty of Dental Practice (UK)
- Royal College of General Practitioners.

The definitions have been agreed with the organisations responsible for the information.

## Summary of changes:

## **Supporting Information**

DENTIST WITH A SPECIAL INTERESTNew Supporting InformationFACULTY OF GENERAL DENTAL PRACTICE (UK)New Supporting InformationGENERAL PRACTITIONER WITH A SPECIAL INTERESTNew Supporting InformationORGANISATIONS INTRODUCTIONChanged DescriptionORGANISATIONS MENUChanged Description

PRACTITIONER WITH A SPECIAL INTEREST renamed from PRACTITIONER WITH A Changed Description, Aliases, Name

SPECIALIST INTEREST

REFERRAL TO TREATMENT SUMMARY PATIENT TRACKING LIST DATA SET Changed Description

<u>OVERVIEW</u>

ROYAL COLLEGE OF GENERAL PRACTITIONERS New Supporting Information

## **Attribute Definitions**

REFERRAL TO TREATMENT PERIOD START DATE

SOURCE OF REFERRAL FOR OUT-PATIENTS

Changed Description

Changed Description

Date: 14 February 2011

Sponsor: Nicholas Oughtibridge, Acting Director - Data Standards and Products, Technology Office, Department of

Health Informatics Directorate

**Note:** New text is shown with a blue background. Deleted text is crossed out. Retired text is shown in grey. Within the Diagrams deleted classes and relationships are red, changed items are blue and new items are green.

## **DENTIST WITH A SPECIAL INTEREST**

Change to Supporting Information: New Supporting Information

A Dentist with a Special Interest (DwSI) is a Practitioner with a Special Interest (PwSI).

A Dentist with a Special Interest is a GENERAL DENTAL PRACTITIONER.

A Dentist with a Special Interest provides special interest dental services in addition to having a generalist role.

For further information on Dentists with Special Interests, see the Faculty of Dental Practice (UK) website.

## This supporting information is also known by these names:

Context	Alias
shortname	DwSI
plural	Dentists with Special Interests
fullname	Dentist with a Special Interest

## **FACULTY OF GENERAL DENTAL PRACTICE (UK)**

Change to Supporting Information: New Supporting Information

The Faculty of General Dental Practice (UK) (FGDP(UK)) is an ORGANISATION.

The <u>Faculty of General Dental Practice (UK)</u> was formed in 1992 and is the academic home for all members of the dental team (including <u>Dentists</u> and <u>Dental Care Professionals</u>).

The aim of the <u>Faculty of General Dental Practice (UK)</u> is to improve the standard of care delivered to <u>PATIENTS</u> through standard setting, postgraduate training and assessment, education and research.

For further information on the Faculty of General Dental Practice (UK), see the Faculty of Dental Practice (UK) website.

### This supporting information is also known by these names:

Context	Alias
shortname	FGDP(UK)

## **GENERAL PRACTITIONER WITH A SPECIAL INTEREST**

Change to Supporting Information: New Supporting Information

A General Practitioner with a Special Interest (GPwSI) is a Practitioner with a Special Interest (PwSI).

A General Practitioner with a Special Interest is a GENERAL MEDICAL PRACTITIONER.

General Practitioners with Special Interests in a clinical area have to be accredited in line with competency frameworks, launched by the Department of Health, Royal College of General Practitioners (RCGP) and Royal Pharmaceutical Society.

For further information on <u>General Practitioners with Special Interests</u>, see the <u>Royal College of General Practitioners</u> website.

## This supporting information is also known by these names:

Context	Alias

shortname	GPwSI
plural	General Practitioners with Special Interests
fullname	General Practitioner with a Special Interest

### **ORGANISATIONS INTRODUCTION**

Change to Supporting Information: Changed Description

<u>ORGANISATIONS</u> such as <u>The NHS Information Centre for health and social care</u>, <u>General Medical Council</u> etc which are included in the NHS Data Model and Dictionary.

## **Referenced Organisations:**

- British Psychological Society
- Care Quality Commission
- Community Health Partnerships (Scotland)
- Department for Education
- Department for Work and Pensions
- Department for Work and Pensions Overseas Healthcare Team
- Department of Health
- Health Protection Agency
- Information Standards Board for Health and Social Care
- International Health Terminology Standards Development Organisation
- <u>Local Health Board (Wales)</u>
- <u>Local Commissioning Group (Northern Ireland)</u>
- National Commissioning Group
- National Institute for Health and Clinical Excellence
- <u>National Specialised Commissioning Group</u>
- NHS Dental Services
- NHS Prescription Services
- NHS Wales Informatics Service
- Office for National Statistics
- Ofsted
- Organisation Data Service
- Royal Pharmaceutical Society
- The Casemix Service
- The NHS Information Centre for health and social care
- UK Terminology Centre
- British Psychological Society
- Care Quality Commission
- Community Health Partnerships (Scotland)
- Department for Education
- Department for Work and Pensions
- Department for Work and Pensions Overseas Healthcare Team
- Department of Health
- Faculty of General Dental Practice (UK)
- Health Protection Agency
- Information Standards Board for Health and Social Care
- International Health Terminology Standards Development Organisation
- Local Health Board (Wales)
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- NHS Dental Services
- NHS Prescription Services
- NHS Wales Informatics Service
- Office for National Statistics
- Ofsted

## **Regulatory Bodies:**

- General Chiropractic Council
- General Dental Council
- General Medical Council
- General Optical Council
- General Osteopathic Council
- General Pharmaceutical Council
   General Social Care Council
- Health Professions Council
- Nursing and Midwifery Council
- Ophthalmic Qualifications Committee

- General Chiropractic Council
- General Dental Council
- General Medical Council
- General Optical Council
- General Osteopathic Council
- General Pharmaceutical Council
- General Social Care Council
- Health Professions Council
- Nursing and Midwifery Council
- Ophthalmic Qualifications Committee

- Organisation Data Service
- Royal College of General Practitioners
- Royal Pharmaceutical Society
- The Casemix Service
- The NHS Information Centre for health and social care
- UK Terminology Centre

## **ORGANISATIONS MENU**

Change to Supporting Information: Changed Description

#### Referenced Organisations:

- British Psychological Society
- o Care Quality Commission
- O Community Health Partnerships (Scotland)
- Department for Education
- O Department for Work and Pensions
- O Department for Work and Pensions Overseas Healthcare Team
- Department of Health
- O Health Protection Agency
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- British Psychological Society
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- o General Chiropractic Council
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- O Nursing and Midwifery Council
- o Ophthalmic Qualifications Committee

# PRACTITIONER WITH A SPECIAL INTEREST\_ renamed from PRACTITIONER WITH A SPECIALIST INTEREST

Change to Supporting Information: Changed Description, Aliases, Name

<u>PROFESSIONALS</u> who develop an additional expertise which enables them to expand their clinical practice in a defined area. These areas include orthopaedics, epilepsy, diabetes, dermatology, palliative care, older people's services and mental health. A Practitioner with a Special Interest (PwSI) is a CARE PROFESSIONAL.

Although their ACTIVITIES within these areas vary widely according to the needs of local PATIENT groups, these practitioners share a common aim - to improve access to SERVICES and bring more secondary care procedures, such as diagnostic tests and minor surgical procedures, into primary care and community settings. A Practitioner with a Special Interest is a GENERAL PRACTITIONER (GP) or Pharmacist who:

- is first and foremost a generalist
- is able to act without direct supervision
- has a level of skill or competence that exceeds the core competences of the individual's normal professional role
- is accredited to deliver specialist clinical services directly to **PATIENTS**.

A Practitioner With A Specialist Interest may provide an Interface Service. For further information on Practitioners with Special Interests, see the Royal College of General Practitioners website.

# PRACTITIONER WITH A SPECIAL INTEREST\_ renamed from PRACTITIONER WITH A SPECIALIST INTEREST

Change to Supporting Information: Changed Description, Aliases, Name

- Changed Description
- Alias Changes
  - Changed Name from Data\_Dictionary.NHS\_Business\_Definitions.P.Practitioner\_With\_A\_Specialist\_Interest to Data\_Dictionary.NHS\_Business\_Definitions.P.Practitioner\_With\_A\_Special\_Interest

Name	Old Value	New Value
plural Practitioners With Specialist Interests		Practitioners with Special Interests

formerly	Practitioner With A Specialist Interest
shortname	PwSI
fullname	Practitioner with a Special Interest

#### REFERRAL TO TREATMENT SUMMARY PATIENT TRACKING LIST DATA SET OVERVIEW

Change to Supporting Information: Changed Description

# Referral to Treatment Summary Patient Tracking List to support delivery of 18 week waiting times

The national 18 Week Summary Patient Tracking List is intended to collect a set of performance information about PATIENTS with active REFERRAL TO TREATMENT PERIODS that are nearing the 18 week target date. Its main purpose is to focus on those PATIENTS that may potentially breach the 18 week target, providing a structure which enables the most 'at risk' PATIENTS to be clearly identified. The 18 Week Referral to Treatment Summary Patient Tracking List does not cover all the components of a Patient Tracking List that individual Providers and Commissioners may wish to develop and share - especially at PATIENT level. The sharing of any extended data sets between Providers and Commissioners is subject to local arrangements. Examples of patient-level data sets developed during piloting of this central return, are available from the Department of Health 18 week website (address below).

For most <u>PATIENTS</u> the start of a <u>REFERRAL TO TREATMENT PERIOD</u> begins with a GP <u>REFERRAL REQUEST</u> to a <u>CONSULTANT</u> in secondary care. In addition this data set also covers <u>REFERRAL REQUESTS</u> to <u>CONSULTANTS</u> from:

- GENERAL DENTAL PRACTITIONERS (GDP)
- GENERAL PRACTITIONERS (Medical or Dental) with a Special Interest (GPwSIs)
- General Practitioners with Special Interests (GPwSI) or Dentists with Special Interests (DwSI)
- OPTOMETRIST
- Orthoptists
- Accident And Emergency Departments (where PATIENTS are transferred to an elective pathway)
- Minor injuries units (where <u>PATIENTS</u> are transferred to an elective pathway)
- Walk in centres (WICs) (where PATIENTS are transferred to an elective pathway)
- Genitourinary medicine clinics
- National <u>Screening Programmes</u> (for non-malignant conditions)
   Specialist <u>NURSES</u> or allied health professionals where <u>Primary Care Trusts</u> have approved these mechanisms locally.

Referrals to nurse consultants and allied health professionals are currently out of scope for 18 weeks Referral To Treatment monitoring.

Guidance on the measurement of <u>REFERRAL TO TREATMENT PERIODS</u>, 18 week clock rules, and Frequently Asked Questions, are all available from the <u>Department of Health</u> 18 week website. Additional Frequently Asked Questions about 18 weeks are also available from the <u>NHS Data Model and Dictionary website</u>.

The  $\underline{\text{Referral to Treatment Summary Patient Tracking List}}$  is in three parts, as follows:

Parts 1A and 1B: Patients where the intent is to treat in an outpatient setting (including <u>PATIENTS</u> where it has not yet been decided whether to admit for treatment or treat in outpatients)

**Part 1A** should be completed for <u>PATIENTS</u> without a <u>DECISION TO ADMIT</u> for treatment, who have not had an <u>ACTIVITY</u> that ends the <u>REFERRAL TO TREATMENT PERIOD</u> (such as their first definitive treatment, a decision to start active monitoring, or who did not attend their first <u>APPOINTMENT</u>)

AND either

a. do not have a future  $\underline{\text{APPOINTMENT}}$  where the anticipated  $\underline{\text{REFERRAL TO TREATMENT PERIOD STATUS}}$  is 30

OR

b. do have a future <u>APPOINTMENT</u> where the anticipated <u>REFERRAL TO TREATMENT PERIOD STATUS</u> is 30, but not earlier than the <u>REFERRAL TO TREATMENT PERIOD BREACH DATE</u>.

**Part 1B** should be completed for <u>PATIENTS</u> without a <u>DECISION TO ADMIT</u> for treatment, who have not had an <u>ACTIVITY</u> that ends the <u>REFERRAL TO TREATMENT PERIOD</u> (such as their first definitive treatment, a decision to start <u>Active Monitoring</u>, or who did not attend their first <u>APPOINTMENT</u>)

AND

whose REFERRAL TO TREATMENT PERIOD BREACH DATE has been reached.

Note that parts 1A and 1B of the 18 Week Referral To Treatment Summary Patient Tracking List are required for submission from 6 January 2008 onwards.

Parts 2A and 2B: Patients where the intent is to admit for treatment

Part 2A should be completed for <u>PATIENTS</u> with a <u>DECISION TO ADMIT</u> for treatment, who have not had an <u>ACTIVITY</u> that ends the <u>REFERRAL TO TREATMENT PERIOD</u> (such as their first definitive treatment, a decision to start <u>Active Monitoring</u>, or who did not attend their first <u>APPOINTMENT</u>)

AND either

a. do not have an agreed OFFERED FOR ADMISSION DATE with an anticipated REFERRAL TO TREATMENT PERIOD STATUS of 30

OR

b. do have an agreed <u>OFFERED FOR ADMISSION DATE</u> with an anticipated <u>REFERRAL TO TREATMENT PERIOD STATUS</u> of 30, but not earlier than the <u>REFERRAL TO TREATMENT PERIOD BREACH DATE</u>.

**Part 2B** should be completed for <u>PATIENTS</u> with a <u>DECISION TO ADMIT</u> for treatment, who have not had an <u>ACTIVITY</u> that ends the <u>REFERRAL TO TREATMENT PERIOD</u> (such as their first definitive treatment, a decision to start <u>Active Monitoring</u>, or who did not attend their first <u>APPOINTMENT</u>)

AND

whose <u>REFERRAL TO TREATMENT PERIOD BREACH DATE</u> has been reached.

Note that Parts 2A and 2B of the 18 Week Referral To Treatment Summary Patient Tracking List are required for submission from July 2007 onwards.

Part 3 - Patients with a clock stop in the last week (who have either been treated, or whose <u>REFERRAL TO TREATMENT PERIOD</u> ended for other reasons).

This section should be completed for <u>PATIENTS</u> with a <u>REFERRAL TO TREATMENT PERIOD END DATE</u> within the last 7 days.

Note that within Part 3 of the 18 Week Referral To Treatment Summary Patient Tracking List, the three data elements relating to admitted <u>PATIENTS</u> are required for submission from July 2007 onwards; the other three data elements relating to non-admitted <u>PATIENTS</u> are required for submission from 6 January 2008 onwards.

Full guidance on the completion and submission of the 18 Week Referral To Treatment Summary Patient Tracking List, including calculation of waiting times, is available from the <a href="Department of Health">Department of Health</a> 18 week website at: <a href="http://www.18weeks.nhs.uk/public/default.aspx?main=true&load=ArticleViewer&ArticleId=947">http://www.18weeks.nhs.uk/public/default.aspx?main=true&load=ArticleViewer&ArticleId=947</a>

## **ROYAL COLLEGE OF GENERAL PRACTITIONERS**

Change to Supporting Information: New Supporting Information

The Royal College of General Practitioners (RCGP) is an ORGANISATION.

The Royal College of General Practitioners is the professional membership body for family doctors in the UK and abroad.

The <u>Royal College of General Practitioners</u> is committed to improving <u>PATIENT</u> care, clinical standards and <u>GENERAL</u> PRACTITIONER training.

For further information on the <u>Royal College of General Practitioners</u>, see the <u>Royal College of General Practitioners</u> website.

## This supporting information is also known by these names:

Context	Alias
shortname	RCGP

#### REFERRAL TO TREATMENT PERIOD START DATE

Change to Attribute: Changed Description

The start date of a REFERRAL TO TREATMENT PERIOD.

This is a specific type of the attribute **ACTIVITY DATE**.

A <u>REFERRAL TO TREATMENT PERIOD START DATE</u> will be one of the following:

## Initial Referral

• the REFERRAL REQUEST RECEIVED DATE of a SERVICE REQUEST for a particular condition.

This will include a <u>PATIENT</u> being re-referred in to a <u>Consultant Led Service</u> or an <u>Interface Service</u> as a new referral including after a <u>Discharge After Patient Did Not Attend</u>. The <u>REFERRAL TO TREATMENT PERIOD STATUS</u> is '*National Code 10 - first activity'*;

or

## Following an APPOINTMENT that the PATIENT did not attend

• the <u>APPOINTMENT ACCEPTED DATE</u> (or the <u>INVITATION OFFER DATE SENT</u> of the first <u>APPOINTMENT OFFER</u> where the <u>APPOINTMENT OFFER</u> is sent) for the first <u>APPOINTMENT</u> following the <u>PATIENT</u> not attending an <u>APPOINTMENT</u> or elective admission. See <u>REFERRAL TO TREATMENT PERIOD</u> and <u>Discharge After Patient Did Not Attend</u> for guidance on <u>PATIENTS</u> who do not attend.

The <u>APPOINTMENT DATE</u> of the <u>APPOINTMENT</u> that the <u>PATIENT</u> did not attend should be used where it is not possible to identify the <u>APPOINTMENT ACCEPTED DATE</u> or the <u>INVITATION OFFER DATE SENT</u>. The <u>REFERRAL TO TREATMENT PERIOD STATUS</u> is '*National Code 10 - first activity'* or

## Following active monitoring

• the <u>ACTIVITY DATE</u> of a <u>CARE ACTIVITY</u> when a decision to treat was made following <u>Active Monitoring</u> and the <u>REFERRAL TO TREATMENT PERIOD STATUS</u> is '*National Code 11 - active monitoring end*'

This will include a decision to start a substantively new or different treatment that does not already form part of that <a href="PATIENT">PATIENT</a>'s agreed <a href="CARE PLAN">CARE PLAN</a>.

or

#### On identifying a separate condition

• the <u>REFERRAL REQUEST RECEIVED DATE</u> of a <u>SERVICE REQUEST</u> when a decision has been made to refer the <u>PATIENT</u> directly to a <u>Consultant Led Service</u> for a separate condition (the <u>REFERRAL TO TREATMENT PERIOD</u>

STATUS for the first CARE ACTIVITY with the new CONSULTANT is 'National Code 12 - consultant referral').

For most <u>PATIENTS</u>, the start of the <u>REFERRAL TO TREATMENT PERIOD</u> begins with a <u>SERVICE REQUEST</u> from a GENERAL MEDICAL PRACTITIONER to a CONSULTANT.

<u>SERVICE REQUESTS</u> to <u>CONSULTANTS</u> who provide care services in community settings (for example in outreach clinics, directly employed by a <u>Primary Care Trust</u> or working in a community hospital) also start <u>REFERRAL TO TREATMENT PERIODS</u> and the <u>REFERRAL REQUEST RECEIVED DATE</u> will be the start of the <u>REFERRAL TO TREATMENT PERIOD</u>.

A REFERRAL TO TREATMENT PERIOD may also start from SERVICE REQUESTS to CONSULTANTS from GENERAL DENTAL PRACTITIONER, Practitioner With A Specialist Interest, OPTOMETRISTS and Orthoptists, National Screening Programmes, Specialist NURSES, other CARE PROFESSIONALS where Primary Care Trusts have approved these mechanisms locally. A REFERRAL TO TREATMENT PERIOD may also start from SERVICE REQUESTS to CONSULTANTS from GENERAL DENTAL PRACTITIONERS, Practitioners with Special Interests, OPTOMETRISTS and Orthoptists, National Screening Programmes, Specialist NURSES, other CARE PROFESSIONALS where Primary Care Trusts have approved these mechanisms locally.

An 18-week clock also starts upon a self referral by a <u>PATIENT</u> to the above services, where these pathways have been agreed locally by commissioners and providers and once the referral is ratified by a <u>CARE PROFESSIONAL</u>.

A <u>REFERRAL TO TREATMENT PERIOD</u> will also start where <u>PATIENTS</u> are transferred to an elective <u>Consultant Led Service</u> through <u>SERVICE REQUESTS</u> from <u>Accident And Emergency Departments</u> including Minor injuries units and Walk In Centres.

#### SOURCE OF REFERRAL FOR OUT-PATIENTS

Change to Attribute: Changed Description

A classification which is used to identify the source of referral of each Consultant Out-Patient Episode.

National Codes:

Initiated by the **CONSULTANT** responsible for the **Consultant Out-Patient Episode** 

- 01 following an emergency admission
- 02 following a <u>Domiciliary Consultation</u>
- 10 following an Accident And Emergency Attendance (including Minor Injuries Units and Walk In Centres)
- 11 other initiated by the CONSULTANT responsible for the Consultant Out-Patient Episode

Not initiated by the CONSULTANT responsible for the Consultant Out-Patient Episode

- 03 referral from a GENERAL MEDICAL PRACTITIONER
- 92 referral from a GENERAL DENTAL PRACTITIONER
- 12 referral from a GENERAL PRACTITIONER with Special Interest
- referral from a <u>General Practitioner with a Special Interest</u> (<u>GPwSI</u>) or <u>Dentist with a Special Interest</u> (<u>DwSI</u>)
- 04 referral from an Accident And Emergency Department (including Minor Injuries Units and Walk In Centres)
- o5 referral from a <u>CONSULTANT</u>, other than in an <u>Accident And Emergency Department</u>
- 06 self-referral
- 07 referral from a <u>Prosthetist</u>
- 13 referral from a Specialist NURSE (Secondary Care)
- 14 referral from an Allied Health Professional
- 15 referral from an OPTOMETRIST
- 16 referral from an Orthoptist
- 17 referral from a National <u>Screening Programme</u>
- 93 referral from a Community Dental Service
- 97 other not initiated by the CONSULTANT responsible for the Consultant Out-Patient Episode

Note: The classification has been listed in logical sequence rather than numeric order.

Where a PATIENT is referred by a GENERAL PRACTITIONER with Special Interest, National Code 12 - referral from a GENERAL PRACTITIONER with Special Interest should be used. Where a PATIENT is referred by that GENERAL PRACTITIONER acting in their capacity as an ordinary GENERAL MEDICAL PRACTITIONER, or as an ordinary GENERAL DENTAL PRACTITIONER, National Code 03 - referral from a GENERAL MEDICAL PRACTITIONER or National Code 92 - referral from a GENERAL DENTAL PRACTITIONER should be used as appropriate. Where a PATIENT is referred by a GENERAL PRACTITIONER acting in the capacity of a General Practitioner with a Special Interest (GPwSI), National Code 12 - 'referral from a General Practitioner with a Special Interest (GPwSI) or Dentist with a Special Interest (DwSI)' should be used.

Where a PATIENT is referred by that GENERAL PRACTITIONER acting in their capacity as an ordinary GENERAL MEDICAL PRACTITIONER, or as an ordinary GENERAL DENTAL PRACTITIONER, National Code 03 - referral from a GENERAL MEDICAL PRACTITIONER or National Code 92 - referral from a GENERAL DENTAL PRACTITIONER should be used as appropriate.

Two Week Wait Referrals made by Specialist <u>NURSES</u> in Primary Care, under the authority of the <u>GENERAL MEDICAL PRACTITIONER</u> leading their team, should continue to be classified as referrals from the <u>GENERAL PRACTITIONER</u> (National Code 03 - referral from a <u>GENERAL MEDICAL PRACTITIONER</u>). Referrals from Specialist <u>NURSES</u> in Secondary Care should be classified as National Code 13 - referral from a Specialist Nurse (Secondary Care).

For enquiries about this Change Request, please email datastandards@nhs.net