

Referral Portal

Digital Referrals Assessment and Reviews (DRAR)

Overview Guide on how to complete a
Referral/Webform

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1 Introduction

The Referral Portal, also known as DRAR (Digital, Referrals, Assessment, and Reviews) has been developed as a quick and convenient way for CCG(s)/HB(s) to receive CHC referrals that can be imported directly into their Patient Management System.

The Referral Portal is accessible online by both the CCG(s)/HB(s) and a referrer, and is a fully digital platform for submitting and receiving CHC Referrals and up to 10 additional forms of documentation.

This guidance document will provide information on creating a Referral, and a Webform (digital referral), which can be uploaded to your chosen CCG(s)/HB(s).

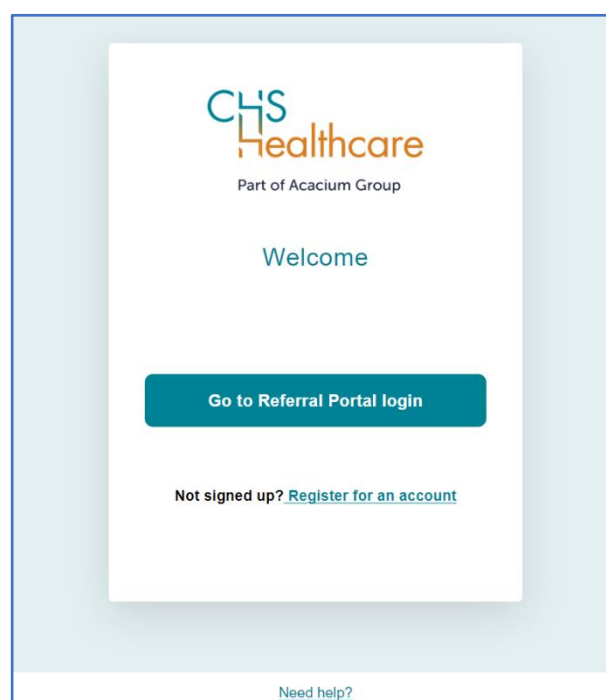
If you are an Administrator please also refer to the Administrator guide.

2 How to access the Referral Portal

The Referral Portal/DRAR can be accessed through your internet browser, ideally Chrome or Microsoft Edge, however, we would recommend having the latest version of the software to ensure the best performance.

3 How to register for the Referral Portal

1. Enter <https://referral-portal.chshealthcare.co.uk/> into your web-browser.
2. You will be directed to the below login page.



3. Click 'Register for an account'.
4. You will be directed to the below page, please enter your details into the sections with an* (highlighted in yellow).

Please note these are Mandatory Fields, and you will be unable to submit until they are complete.

Back

CHS
Healthcare

Register

User Details

Email Address: * Password: *

Full Name: *

Job Title: * Phone Number: *

Place Of Business: *

Training

☐ Completed Checklist Training

Date Of Training: Training Renewal Date:

CCG(s)/HB(s)

CCG(s)/HB(s): *

Submit

Please note the training section is not a mandatory field, you can enter a date that you completed the training or a date that has been agreed with the CCG/HB, if you are unsure, please contact the CCG/HB Lead who can assist you with your training requirements.

Select the CCG(s)/HB(s) you will be sending referrals to. You can select more than one and if you add an CCG(s)/HB(s) name by mistake, press x next to the name to remove it.

CCG(s)/HB(s)

CCG(s)/HB(s): *

Ashford x

Bedrock CCG

Cheshire East

Crewe & Nantwich

Demo Test

Demonstration ICB

Once you are ready to upload a referral (this will be explained in more detail on how to complete a Referral/Webform), the CCG(s)/HB(s) you have selected in the Registration Section will be provided as an option to select, this is to ensure the referral and any supporting documentation are uploaded to the correct CCG(s)/HB(s) Patient Management System.

5. Once you have completed all sections, please click the Submit button.
6. You will receive the below email advising your account has been created successfully. Please **DO NOT** click Login, please wait for the email.

You have successfully created a Referral Portal account

We have sent an email to the email address you gave us. Please read the email for the next step to set up your account.

Login

7. You will receive a 'Welcome' email.

Welcome to Referral Portal

Referral Portal invited you to create a new Referral Portal account.

Here is the account information they provided for you:

Email address: rebecca.maynard@chshealthcare.co.uk

Organisation: Referral Portal

To set the password for your new account, please select the button below:

Set password

To visit Referral Portal, please select the button below:

Visit Referral Portal

For any issues with your account, please contact your ICB supervisor or [visit our help page](#)

Thank you.

The Referral Portal Team.

4 Setting up your account

In alignment with NHS England's digital programme, we have introduced Multi-Factor Authentication (MFA) to the Referral Portal (DRAR). MFA is an additional way of checking that it is really you when you log into your account.

To log into Referral Portal (DRAR) using an Email Address and Password, there is an additional second form of authentication. There are two options available; Authentication App or Security Key.

This second layer of security is designed to prevent anyone but you from accessing your account, even if they know your password.

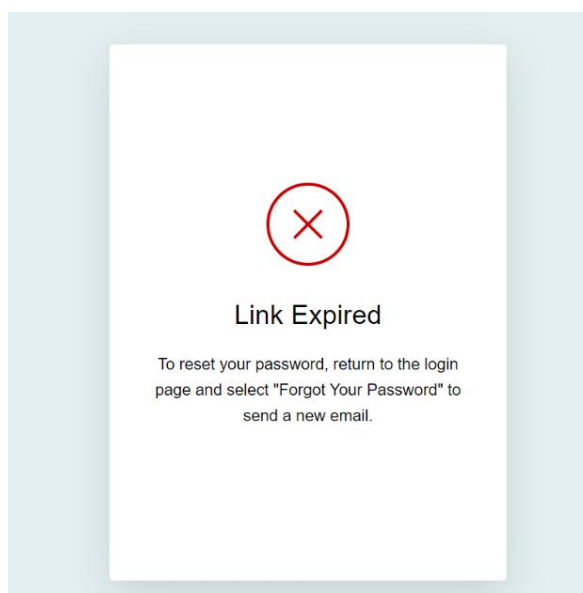
- a. If you already have a log in for either BroadCare or Caretrack and are using the same browser to login to the Referral Portal/DRAR you will not be prompted to set a new password, due to Single Sign-On (SSO), the password you set previously will be used for either BroadCare or Caretrack, and the Referral Portal/DRAR. Please visit the Referral Portal from the 'Welcome' email. As MFA has already been set up using your preferred method, it will direct you to either 'Enter your one-time code' or 'Use Security Key'. If you are using an Authenticator App,

you can enter the one-time code displayed within the app that you use for BroadCare, or Caretrack as this will log you into all platforms you have access to.

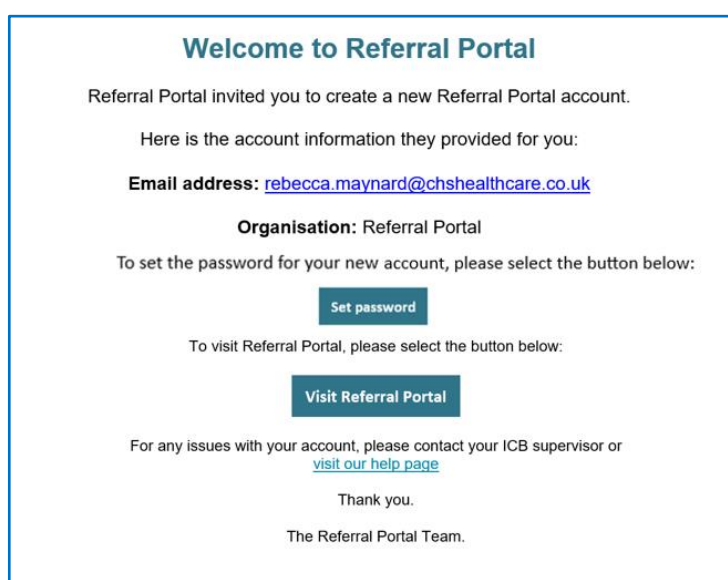
- b. If you are an external referrer that sends referrals into an ICB/HB and do not have access to BroadCare or Caretrack you will be prompted to set a new password.

Please reference the below information for individuals that have not set up MFA previously for BroadCare or Caretrack.

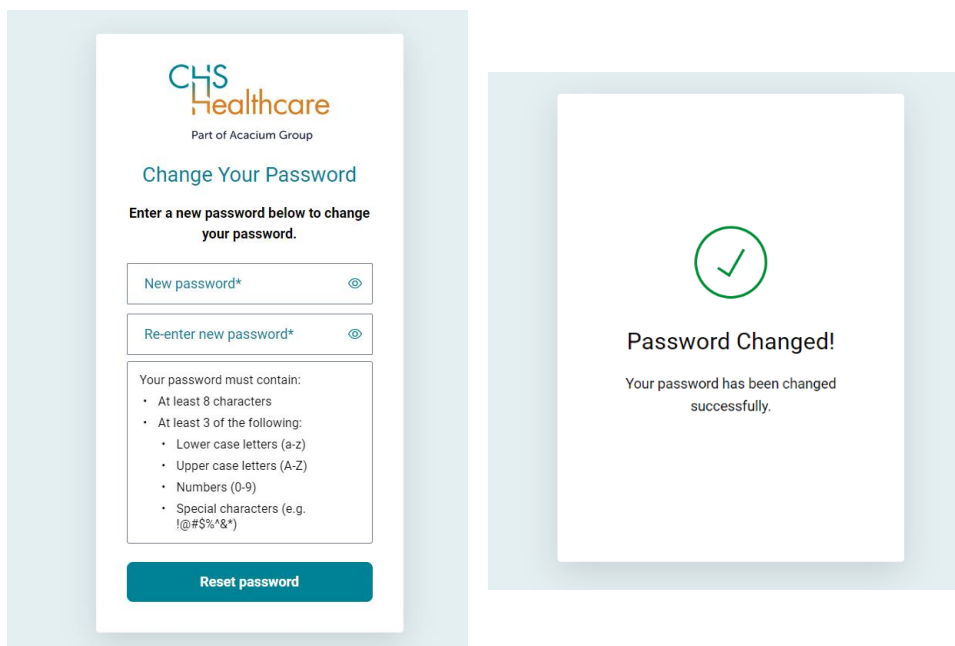
1. Click 'Set password'.
 - Ensure your passwords includes a unique character and a number i.e YellowToad!456.
 - Please note the 'Set password' link will expire after 5 days. If you click 'Set password' after 5 days of receiving the 'Welcome' email the below message will appear, prompting you to select 'Forgot password' from your login page. Please reference section 5 for more information.
 - Please set your password before setting up MFA.



2. After you have set a new password, or if the 'Set password' link has expired, click 'Visit Referral Portal'.



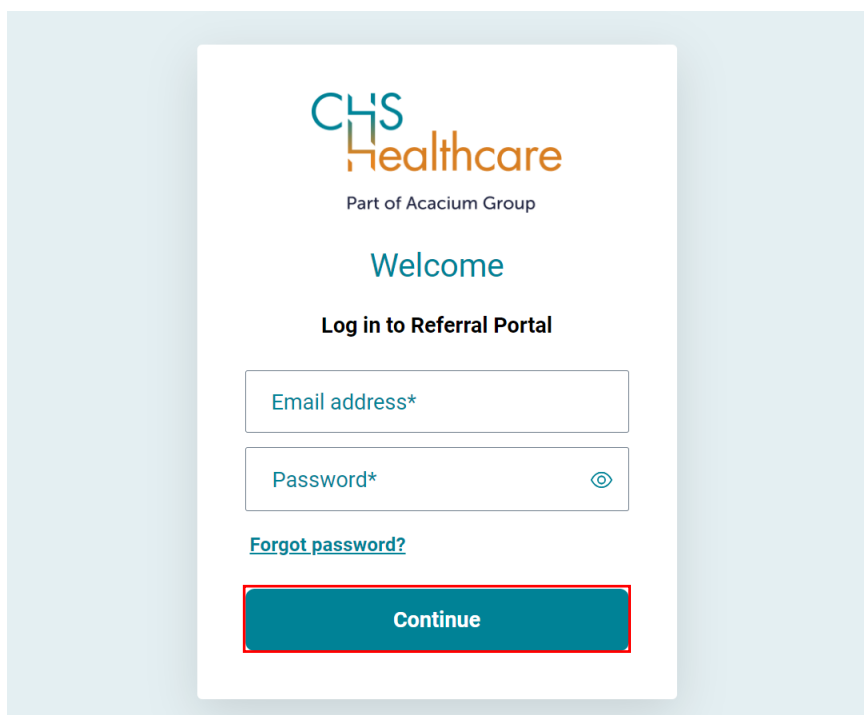
- If your 'Set Password' link has expired, please click 'Forgot password', this will generate a password reset link to your email address, enter a new password and click 'Rest password'.



The first screenshot shows the 'Change Your Password' page. It includes the CHS Healthcare logo, the text 'Part of Acacium Group', and the heading 'Change Your Password'. Below this is the instruction 'Enter a new password below to change your password.' There are two input fields: 'New password*' and 'Re-enter new password*', each with an eye icon for toggling visibility. A list of password requirements is provided: 'Your password must contain:' followed by a bulleted list: 'At least 8 characters', 'At least 3 of the following:', 'Lower case letters (a-z)', 'Upper case letters (A-Z)', 'Numbers (0-9)', and 'Special characters (e.g. !@#%*&*)'. At the bottom is a blue button labeled 'Reset password'.

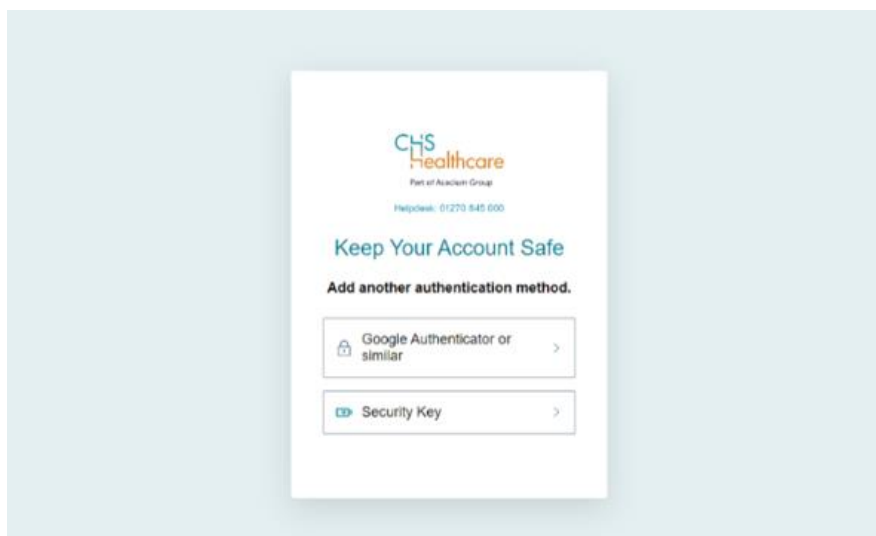
The second screenshot shows the 'Password Changed!' confirmation page. It features a green checkmark icon in a circle, the heading 'Password Changed!', and the message 'Your password has been changed successfully.'

- Once you have set your password please click 'Visit Referral Portal' from your 'Welcome' email.
- Enter your Email Address and Password and click 'Continue'.



The screenshot shows the 'Welcome' page for logging into the Referral Portal. It features the CHS Healthcare logo and the text 'Part of Acacium Group'. The heading 'Welcome' is followed by 'Log in to Referral Portal'. There are two input fields: 'Email address*' and 'Password*', with an eye icon for the password field. Below the password field is a link labeled 'Forgot password?'. At the bottom is a blue button labeled 'Continue', which is highlighted with a red border.

6. Select your ICB/HB's preferred MFA method, either the Authentication App or Security Key.

**Authenticator App:**

This could be the Microsoft Authenticator App or similar, it is a secure method of receiving a verification code to your smartphone or tablet.

[Find out how to download the Authenticator app for your device](#)

Security Key:

There are different Security Key options, for instance FIDO (Fast Identity Online), this is a physical security key/token. It is a secure, hardware-based authentication method. For instance, it can be used in the USB drive of your laptop or computer.

[Read more about FIDO2 on the NHSmail website](#)

4.1 Considerations

- a) Once you have set up MFA, this will be your preferred MFA option and you will not need to set up MFA again.
- b) Once you have activated MFA for the day, you will remain logged into MFA for 12 hours unless you log out of all platforms (please reference section 6 for further information).
- c) If you use one email login for multiple users for instance if you work in a Carehome or Hospital setting, please ensure that once you have submitted your referral you 'Exit the Referral Portal' to allow another user to login. Please note the 'Welcome' email will go to the email address that is used once registered. It is best practice to have users set up under their own user profile.
- d) MFA is activated for the browser you are using to log into Referral Portal (DRAR), if you log into Referral Portal (DRAR) or another application using another browser you will need to activate again so MFA is recognised on the other browser.
- e) If you wish to exit Referral Portal (DRAR), MFA will allow you to automatically log back in, however if you log out of all platforms this will log you out completely and you will be required to log back in using your credentials; Email Address and Password, and preferred MFA method.
- f) If you have access to other CHS Healthcare applications you will be automatically signed into these using Single Sign-On (SSO).

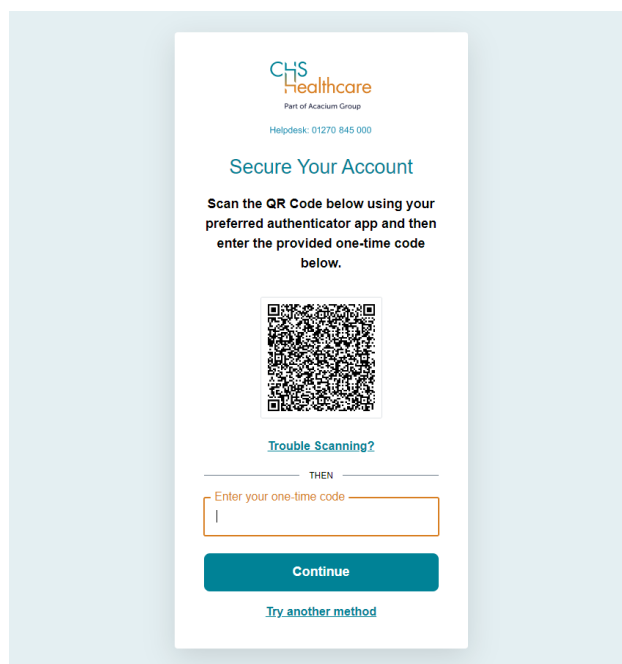
4.2 Authenticator App

If you have chosen to use an Authenticator App, you will initially need to download this on to your Apple or Android device i.e., mobile or tablet.

For further information on how to download this, please use the below link, this will guide you through the set up process.

[Find out how to download the Authenticator app for your device](#)

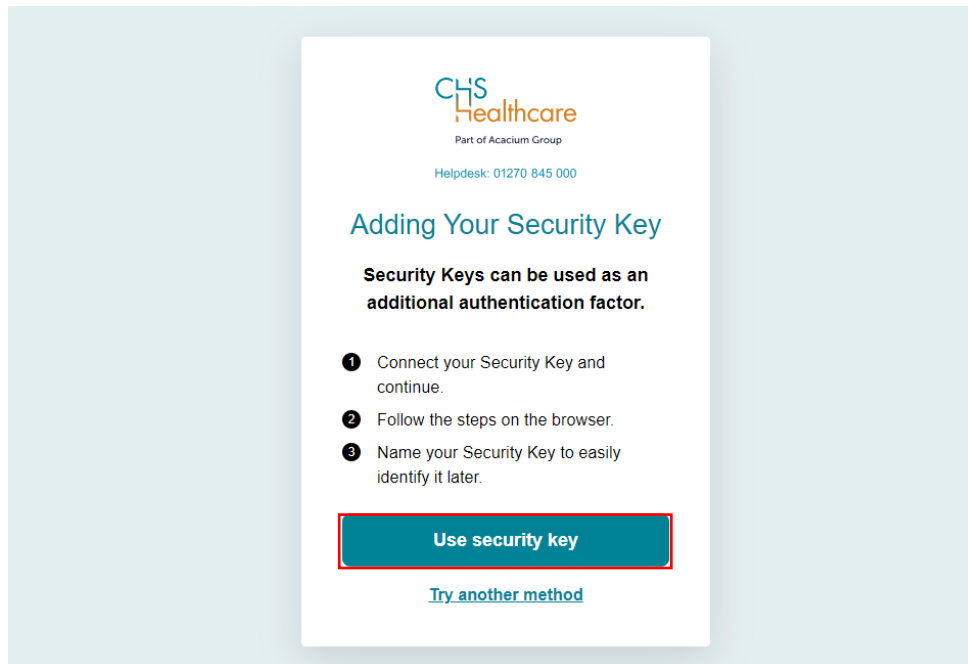
1. Install your preferred Authenticator App.
2. Within your preferred Authenticator App scan the below QR Code, example shown below, please do not scan this code, your unique code will be sent to you once you have received your 'Welcome email'.



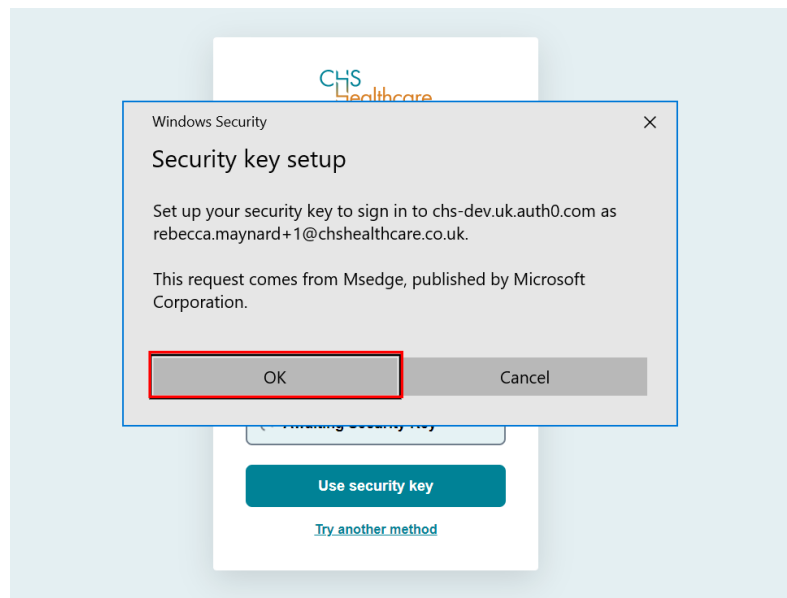
3. After you have scanned the QR code from your Authenticator App, you will have your Referral Portal (DRAR) account details added to the App, by clicking on this within the App, a one-time code will appear, this will reset every 30 seconds.
4. Enter the code in the 'Enter your one-time code' box and press 'Continue'.
5. MFA has now been set up and is ready to use for accessing Referral Portal (DRAR).
6. The QR will not be required again as MFA has been set up, you will only require your Email Address, Password, and One-time code every 12 hours to access Referral Portal (DRAR).

4.3 Security Key

1. Plug your Security Key into your Laptop or Desktop.
2. Click on 'Use Security Key'.

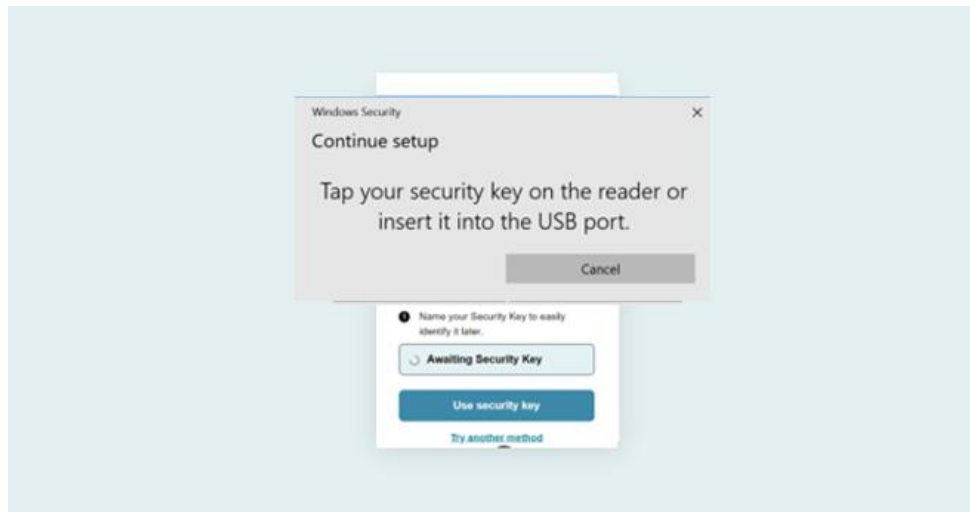


3. Once 'Use security key' is clicked, the below popup will appear.

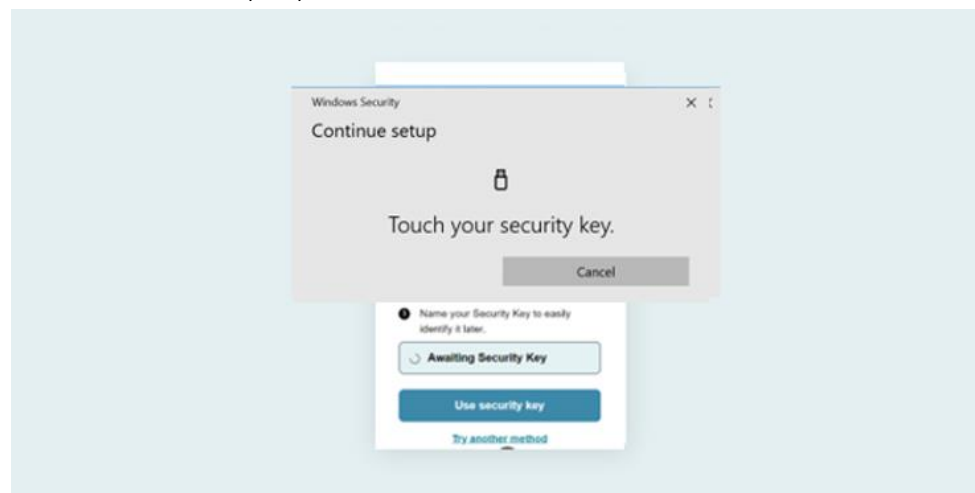


4. Click OK to validate the Security Key.

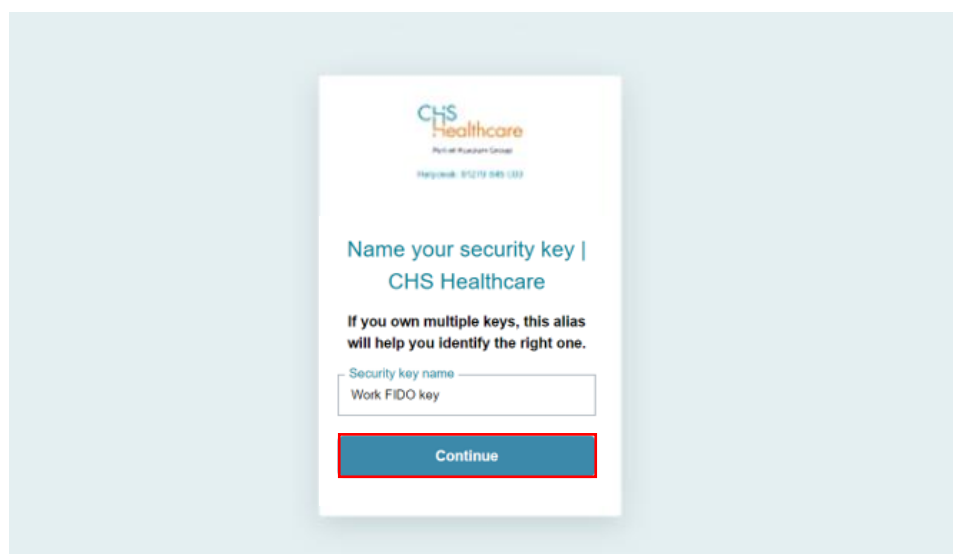
5. A pop up will appear prompting you to enter your Security Key into the USB port of your laptop or computer.



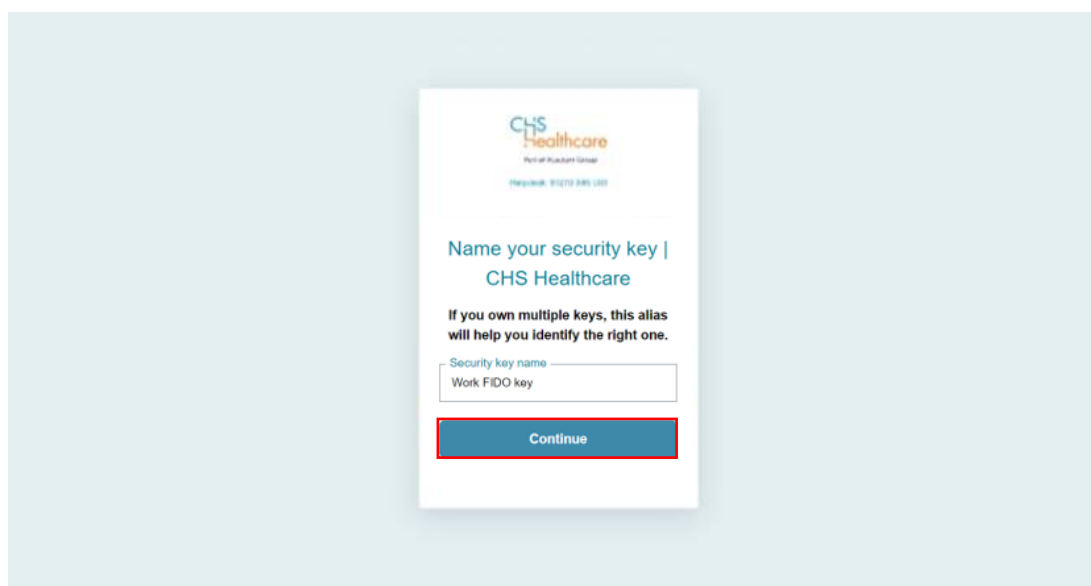
6. Once you have entered your Security Key into the USB slot, you will be prompted to press the button on the Security Key.



7. You will be prompted to enter a name for your Security Key. Once you have entered a name, click 'Continue'.



8. You have now successfully registered your Security Key. Click 'Continue'.

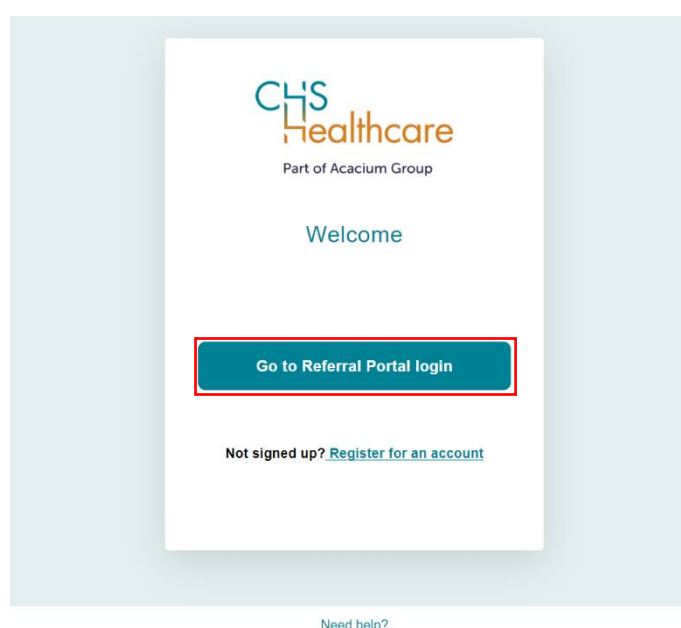


9. MFA has now been set up, ready to use for accessing Referral Portal (DRAR).

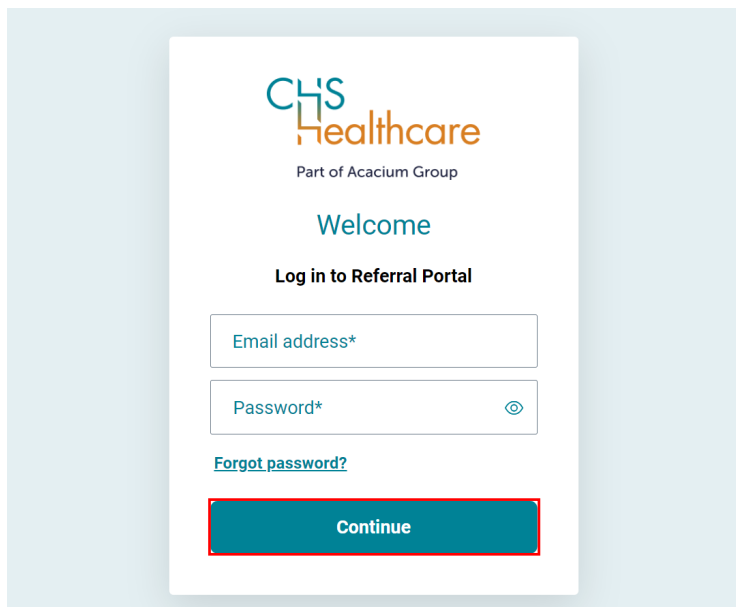
5 Logging into Referral Portal (DRAR)

After initial set up of MFA and you have chosen your preferred method of authentication, you will now be ready to access Referral Portal (DRAR).

1. Insert your URL (address of Referral Portal (DRAR)) into your browser, ideally the latest version of Chrome or Microsoft Edge, this will allow the best user experience.
2. You will be directed to the following 'Welcome' page, allowing you to login into Referral Portal (DRAR), you will also be able to contact the Helpdesk by phone or by creating a ticket on the Support Portal. Within the Support Portal you will also find our 'Knowledge' section, providing user guides on all aspects of Referral Portal (DRAR).
3. Click 'Go to Referral Portal (DRAR) Login'.



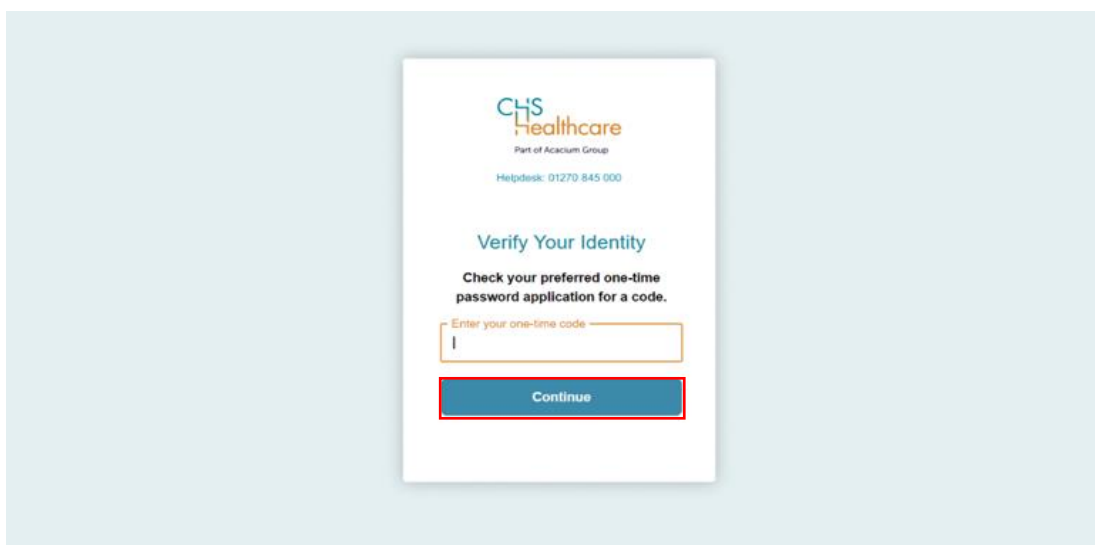
4. You will be redirected to the Referral Portal (DRAR) login page. Enter your Email address and Password and click 'Continue'.

The image shows the login page for the CHS Healthcare Referral Portal. At the top is the CHS Healthcare logo, followed by the text "Part of Acacium Group". Below this is a "Welcome" message and a heading "Log in to Referral Portal". There are two input fields: "Email address*" and "Password*", with a toggle icon for the password field. A link for "Forgot password?" is located below the password field. At the bottom is a large blue "Continue" button with a red border.

5. You will be prompted to verify your identity, please reference the option below depending on your method of authentication.

5.1 Authentication App

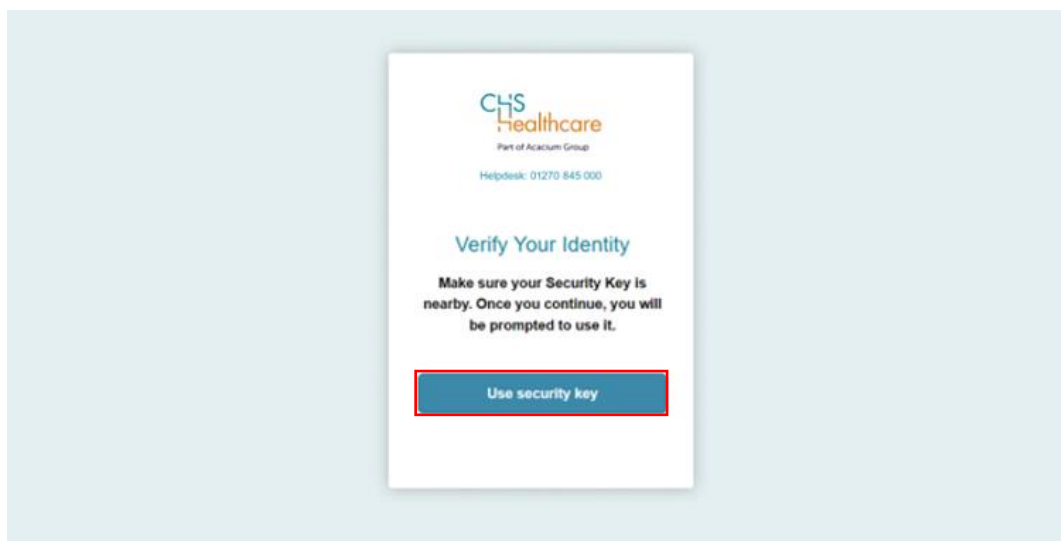
1. After entering Email Address and Password into Referral Portal (DRAR).
2. Go to your Authentication App.
3. Select Referral Portal (DRAR) within the App.
 - If you are an ICB/HB you will use your BroadCare/Caretrack code.
 - If you are already logged into BroadCare or Caretrack you will be automatically logged in to the Referral Portal due to Single Sign-On (SSO).
4. Enter your 'one-time code' in the box below and click 'Continue'.

The image shows the "Verify Your Identity" page. It features the CHS Healthcare logo and "Part of Acacium Group" text. Below is a "Helpdesk: 01270 845 000" number. The heading "Verify Your Identity" is followed by the instruction "Check your preferred one-time password application for a code." There is an input field labeled "Enter your one-time code" with a small icon of a one-time password generator. At the bottom is a large blue "Continue" button with a red border.

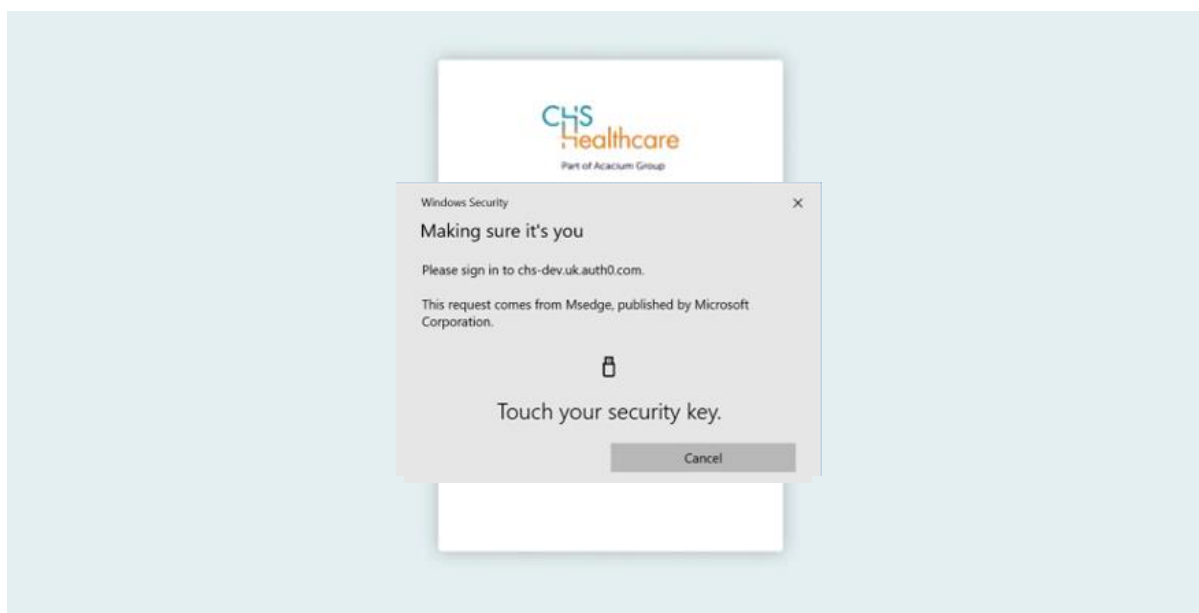
5. You are now logged into Referral Portal (DRAR).

5.2 Security Key

1. After entering your Email Address and Password into Referral Portal (DRAR).
2. Click on 'Use security key'.



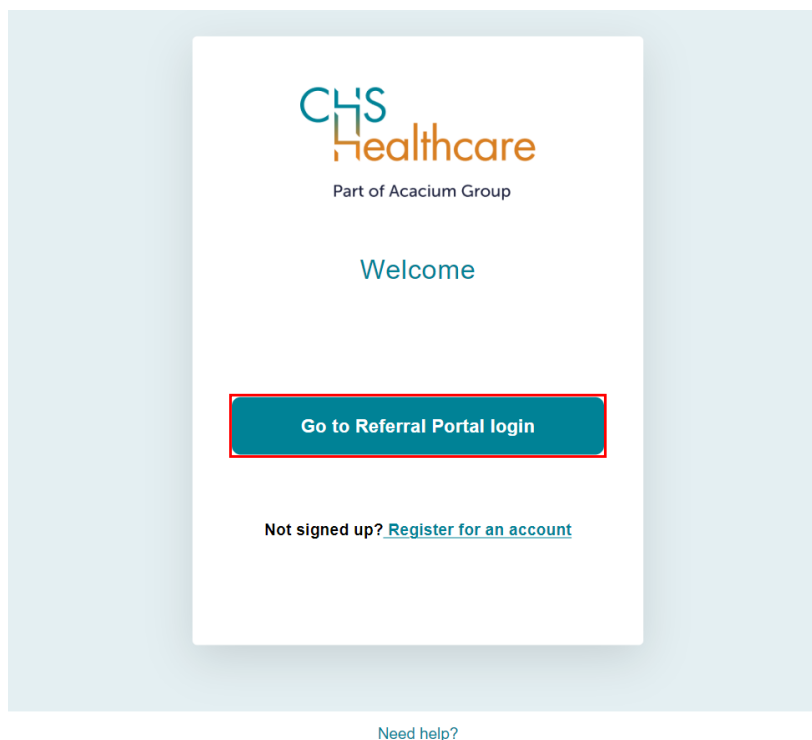
3. A pop up will appear where you can select your Security Key. This can be easily identified from the name you selected when validating it.
4. Now plug your Security Key into your laptop or computer or click the button on the Security Key.



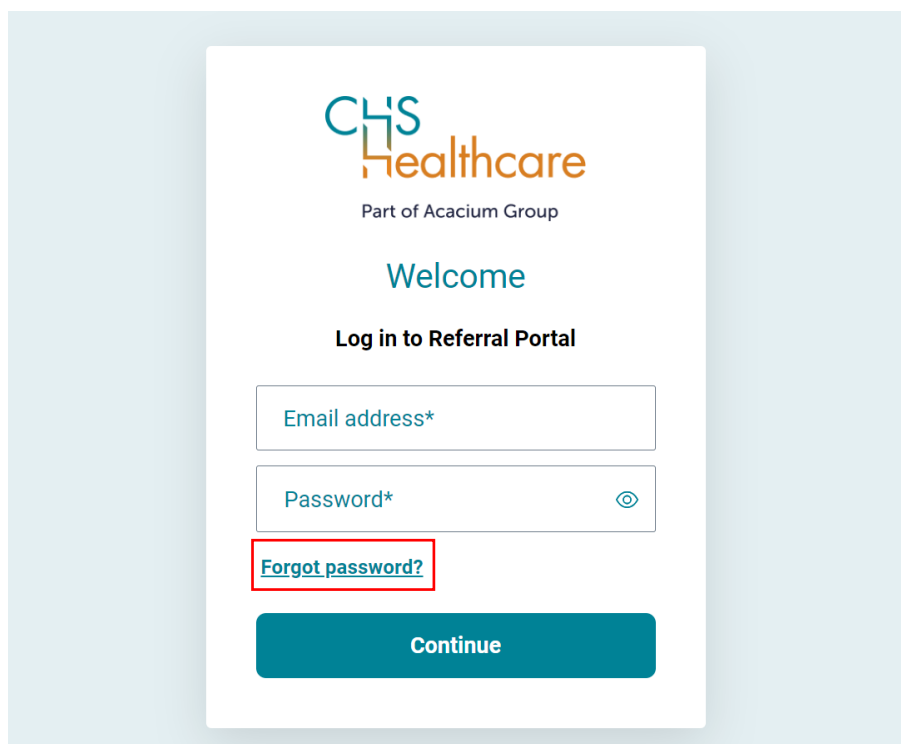
5. You are now logged into Referral Portal (DRAR).

6 Forgotten Password/Password Reset

1. Enter your Referral Portal (DRAR) URL in to your browser or if you have bookmarked to your desktop click on this, you will be directed to the Referral Portal (DRAR) 'Welcome' page.
2. Click on 'Go to Referral Portal (DRAR) Login'.



3. Click 'Forgot password'.



4. Enter your Email address and click 'Continue'.

CHS
Healthcare

Part of Acacium Group

Helpdesk: 01270 845 000


Forgot Your Password?

Enter your email address and we will
send you instructions to reset your
password.

Continue

[Back to CHS Healthcare](#)

5. You will receive the below message.



Check Your Email

Please check the email address

Resend email

6. Please check your email for the password reset instructions.
7. From the email click 'Reset password'.

CHS
Healthcare

Part of Acacium Group

Reset your password

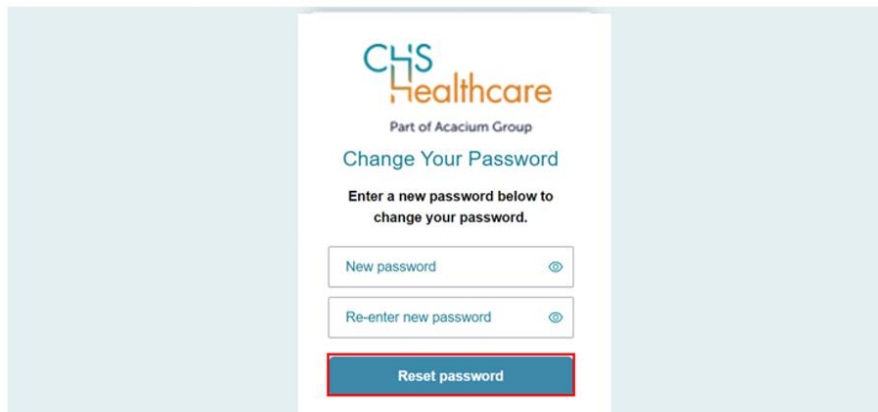
We received a request to reset the password for your Referral Portal account.
If you did not make this request, please ignore this email. Please check if you can still log in to your account too.

To reset your password, select the button below:

Reset password

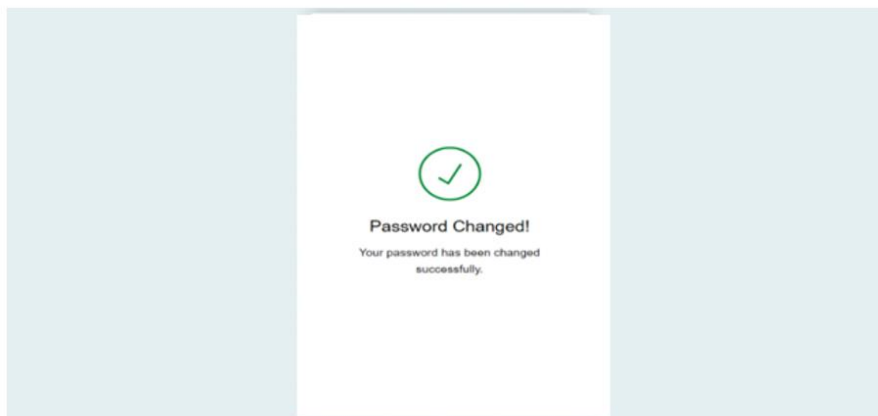
Thank you.

8. Enter your new password and click 'Reset password'.



The screenshot shows a web form titled 'Change Your Password' with the CHS Healthcare logo and 'Part of Acacium Group' text. Below the title, it says 'Enter a new password below to change your password.' There are two input fields: 'New password' and 'Re-enter new password', each with a toggle icon for password visibility. A red-bordered button labeled 'Reset password' is at the bottom.

9. Your password has now been changed.

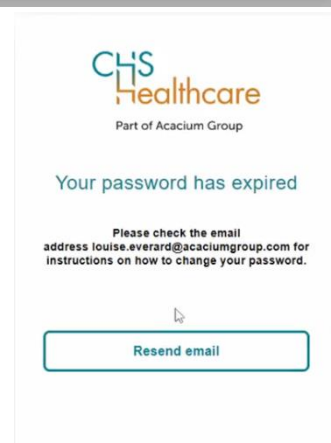


6.1 Password rotation

Your password will be required to change every 90 days which is in line with NHSE guidelines. From day 83, you will be given a 7 day long countdown prompting you to make the change, by way of a dynamic modal pop-up with daily decrements, with which the user can interact and change their password before the end of the period.



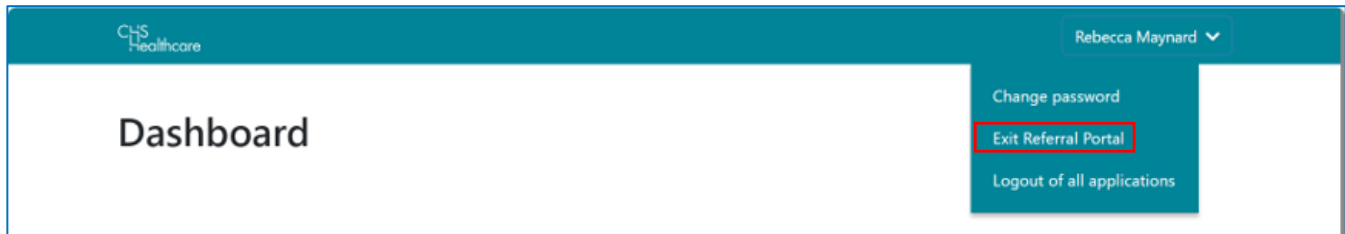
On day 90 you will receive a password expired modal, triggering a password reset email and you will not be able to proceed to MFA or access any site you are registered with until the new password has been successfully set and log in with this password is complete.



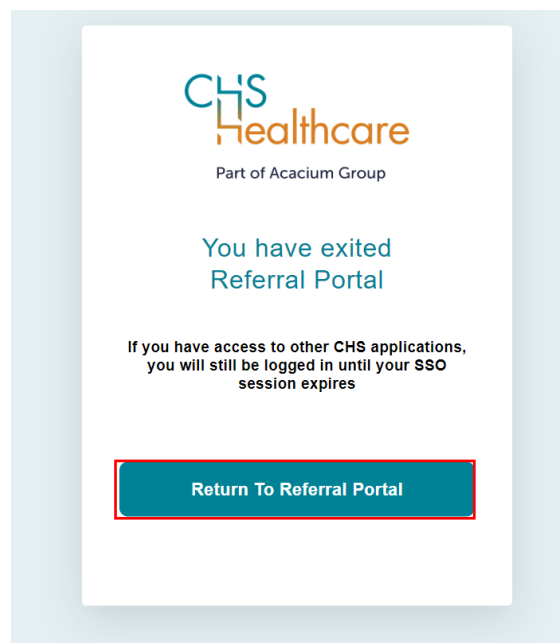
7 Exiting Referral Portal (DRAR)

7.1 If you wish to exit Referral Portal (DRAR)

1. To leave Referral Portal (DRAR), click 'Exit Referral Portal' on the right by clicking on the down arrow.



2. You will receive the below notification to confirm you have exited Referral Portal (DRAR).



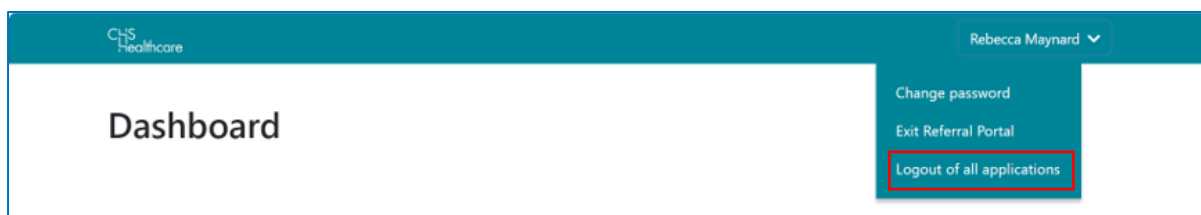
[Need help?](#)

3. To log back into Referral Portal (DRAR), click 'Return To Referral Portal'. You will be taken straight into Referral Portal (DRAR) and will not be required to re-enter your login or MFA credentials.

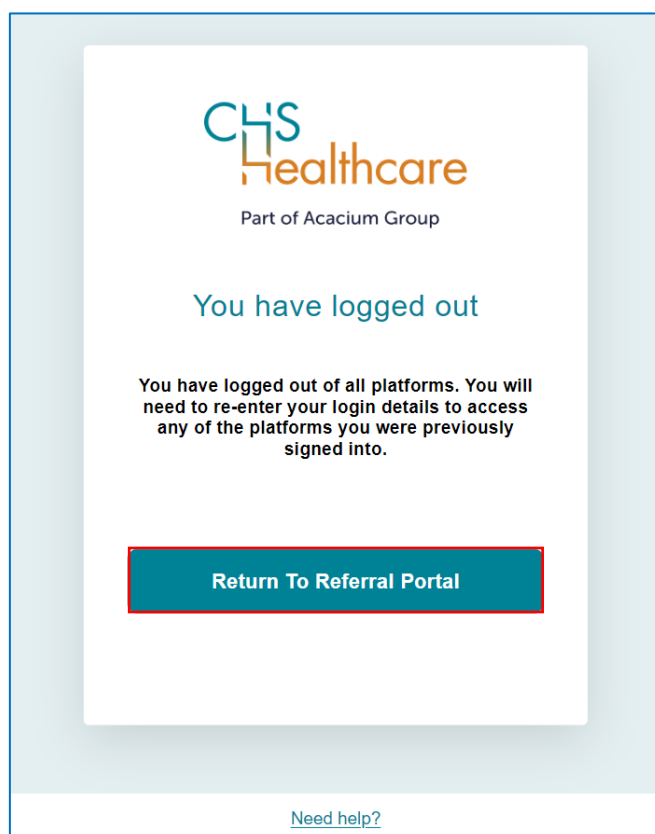
Single Sign-On (SSO) will allow you to log in once using your preferred MFA authentication method for 12 hours for all CHS Healthcare systems you have access to. Please reference 2.2 for further information.

7.2 If you wish to log out of Referral Portal (DRAR)

1. To leave Referral Portal (DRAR) completely, click 'Log out of all platforms' on the right.



2. You will receive the below notification to confirm you have logged out of Referral Portal (DRAR) and all other platforms you have access to.



3. To log back into Referral Portal (DRAR) click 'Return To Referral Portal (DRAR)', you will then be prompted to enter your Email Address and Password and your preferred method of authentication to log back into MFA.

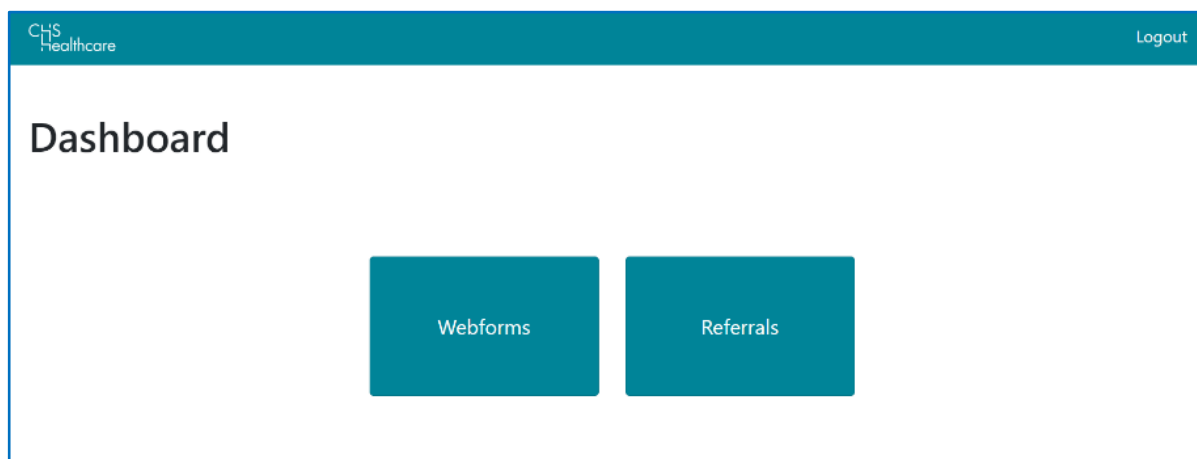
8 Setting up a new user

Depending on your ICB/HB, a new user will either be set up by the ICB/HB or you can self-register.

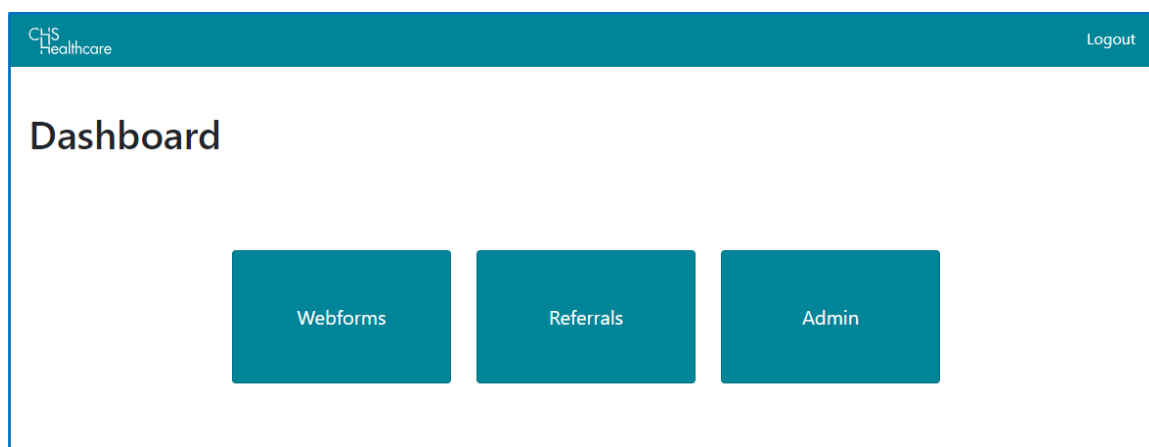
Once a new user has been created within Referral Portal (DRAR), an automatic 'Welcome' email will be sent to the new users registered email address, they can then follow the step by step instructions as detailed in this guide.

9 Completing a Referral/Webform

Once you have logged in, you will be presented with the **Dashboard**, this is where you will see two tiles; Webforms (to create a digital referral), and Referrals (to upload a manual referral, and view the referrals you have In Progress, Completed, and Submitted).

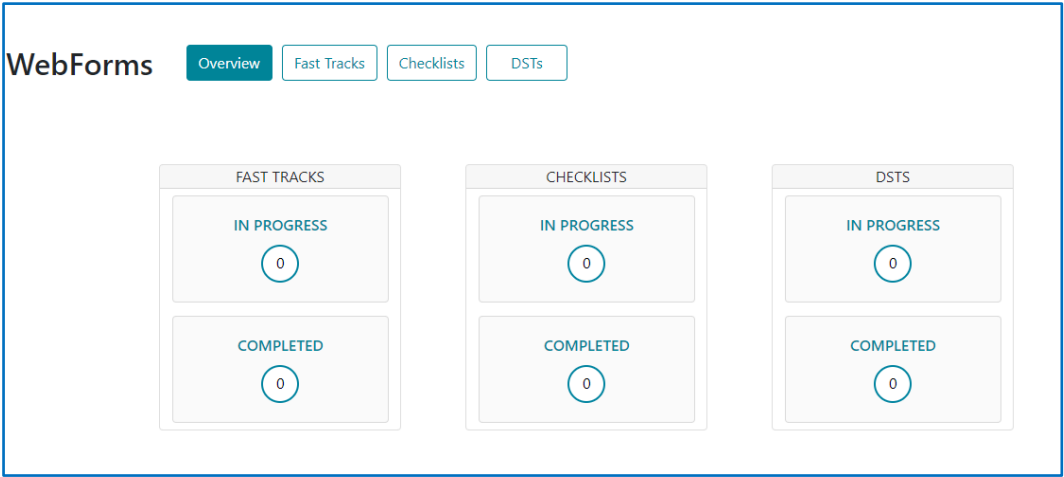


Please note if you are an Administrator you will have access to a further Admin tile. This will allow you to Create, and Amend another users profile.

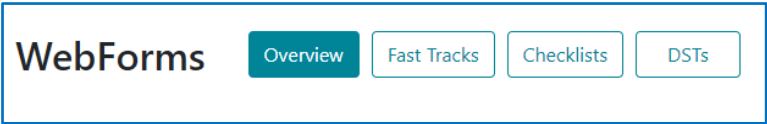


9.1 How to complete a Webform

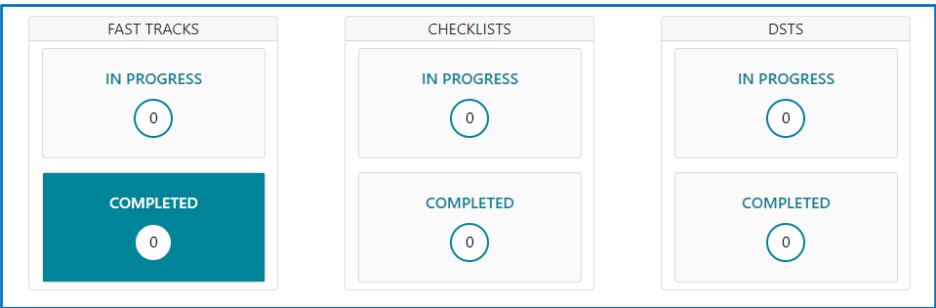
The Webforms tab provides an overview of any webform (Fast Track, Checklist, and DST) you have In Progress (still completing) and Completed (all sections completed but not yet submitted to the CCG/HB).



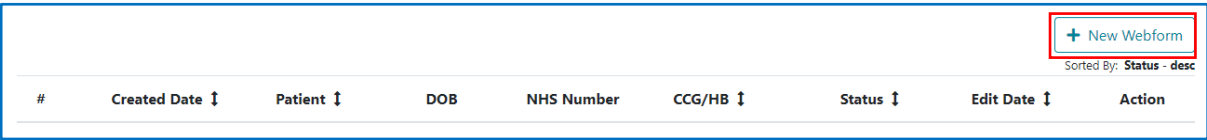
You can either click on one of the tabs across the top.



Or you can click on one of the below tiles.



This will take you to the below screen, with any Webforms In Progress or Completed. You can also start a new Webform by clicking New Webform.



At any stage you can click the CHS Healthcare logo in the top left and it will take you back to the Dashboard.



9.2 How to complete a Digital Fast Track Referral/Webform

Once Fast Track, then New Webform has been selected you will be presented with the below screen.

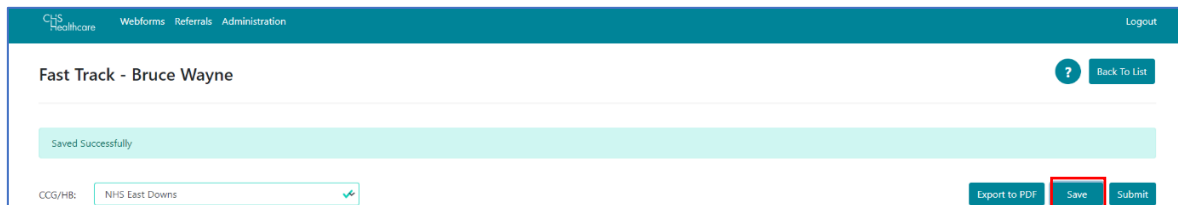
You can find the CHC Fast Track Guidance (the same that you would find at the start of a paper Fast Track) by clicking on the ? Icon and then selecting Guidance. (This will open in PDF Format.)

You can also find guidance on the **Mandatory Fields** here.

Please note, you will need to select a CCG/HB from the drop down before the Mandatory Fields will appear, this is because they are unique to the CCG/HB. There are also some Minimum Fields which are an NHSE Requirement.

As you start to complete the Webform, you will get a **reminder** if any of the Mandatory Fields have not been completed.

You can save your Webform at any time by clicking on the **Save** Button. This will generate a notification that it has been saved successfully.



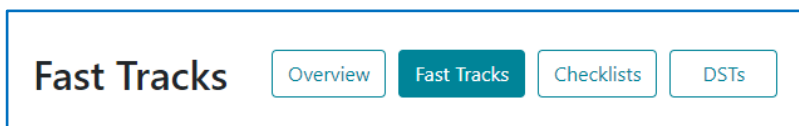
Fast Track - Bruce Wayne

Saved Successfully

CCG/HB: NHS East Downs

Export to PDF Save Submit

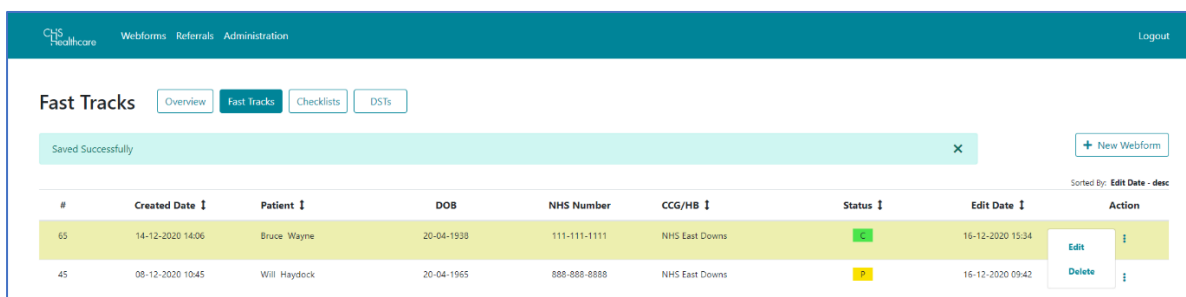
It will then appear in (and can be accessed from) the **Fast Tracks** option on the Webforms page.



Fast Tracks

Overview Fast Tracks Checklists DSTs

Click **Fast Tracks** and then click on the Action Icon (three vertical dots) for the relevant Digital Fast Track. Select **Edit** from the pop-up menu to open it and resume your referral.



Fast Tracks

Overview Fast Tracks Checklists DSTs

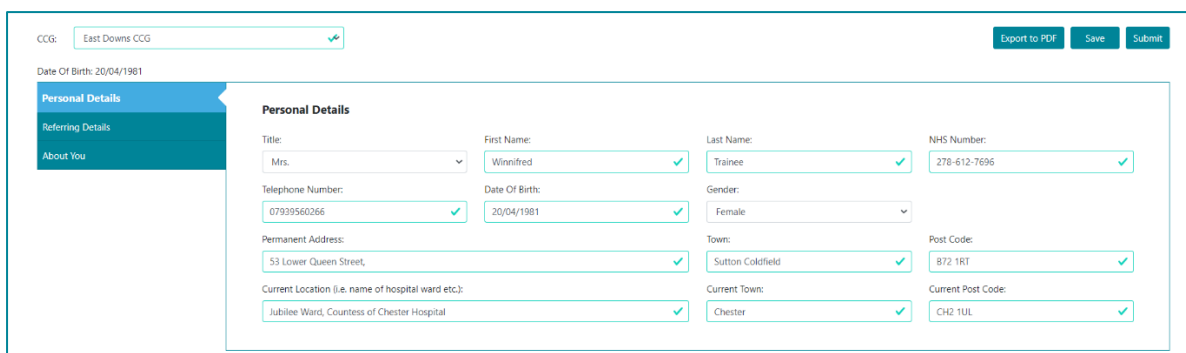
Saved Successfully

+ New Webform

Sorted By: Edit Date - desc

#	Created Date	Patient	DOB	NHS Number	CCG/HB	Status	Edit Date	Action
65	14-12-2020 14:06	Bruce Wayne	20-04-1938	111-111-1111	NHS East Downs	C	16-12-2020 15:34	Edit
45	08-12-2020 10:45	Will Haydock	20-04-1965	888-888-8888	NHS East Downs	P	16-12-2020 09:42	Delete

9.2.1 Personal Details



CCG: East Downs CCG

Export to PDF Save Submit

Date Of Birth: 20/04/1981

Personal Details

Referring Details

About You

Personal Details

Title: Mrs. First Name: Winnifred Last Name: Trainee NHS Number: 278-612-7696

Telephone Number: 07939560266 Date Of Birth: 20/04/1981 Gender: Female

Permanent Address: 53 Lower Queen Street, Sutton Coldfield Post Code: B72 1RT

Current Location (i.e. name of hospital ward etc.): Jubilee Ward, Countess of Chester Hospital Current Town: Chester Current Post Code: CH2 1UL

The fields that you need to complete are:

- Title (via Dropdown Menu)
- First Name
- Last Name
- NHS Number
- Telephone Number
- GP Practice
- Gender (Via Dropdown Menu)

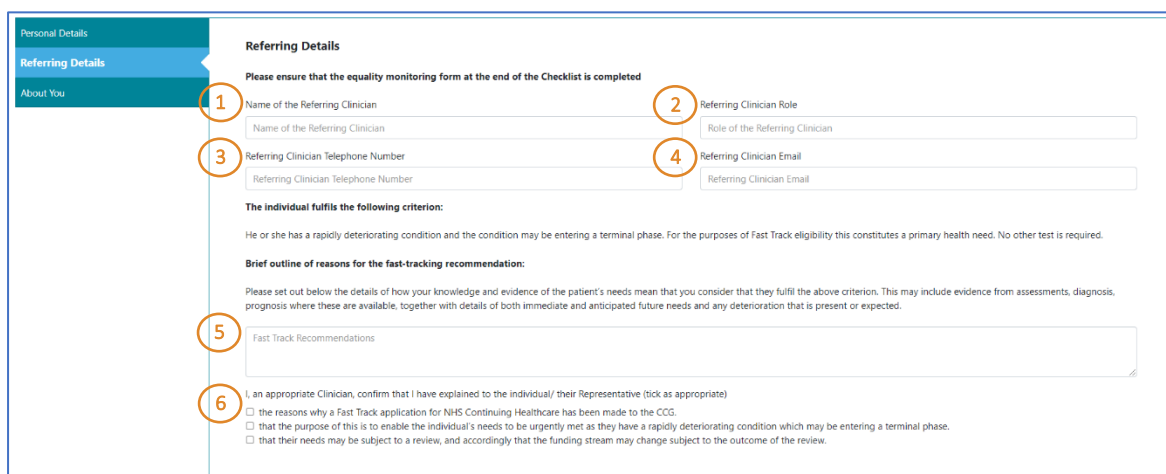
- Date of Birth
- Permanent Address, Town, & Postcode
- Current Location (i.e. name of Hospital Ward etc...), Town & Current Postcode

Once you complete the fields they will be marked with a **green tick**.

There are various validation checks that make sure that some key pieces of the information you enter is in the correct format.

9.2.2 Referring Details

The **Referring Details** section has the following information for you to complete:



Referring Details

Please ensure that the equality monitoring form at the end of the Checklist is completed

- 1 Name of the Referring Clinician
- 2 Referring Clinician Role
- 3 Referring Clinician Telephone Number
- 4 Referring Clinician Email
- 5 Fast Track Recommendations
- 6 I, an appropriate Clinician, confirm that I have explained to the individual/ their Representative (tick as appropriate)

The individual fulfils the following criterion:

He or she has a rapidly deteriorating condition and the condition may be entering a terminal phase. For the purposes of Fast Track eligibility this constitutes a primary health need. No other test is required.

Brief outline of reasons for the fast-tracking recommendation:

Please set out below the details of how your knowledge and evidence of the patient's needs mean that you consider that they fulfil the above criterion. This may include evidence from assessments, diagnosis, prognosis where these are available, together with details of both immediate and anticipated future needs and any deterioration that is present or expected.

I, an appropriate Clinician, confirm that I have explained to the individual/ their Representative (tick as appropriate)

- ☐ the reasons why a Fast Track application for NHS Continuing Healthcare has been made to the CCG.
- ☐ that the purpose of this is to enable the individual's needs to be urgently met as they have a rapidly deteriorating condition which may be entering a terminal phase.
- ☐ that their needs may be subject to a review, and accordingly that the funding stream may change subject to the outcome of the review.

1. Name of Referring Clinician.
2. Referring Clinician Role.
3. Referring Clinician Telephone Number.
4. Referring Clinician Email.
5. Fast Track Recommendations.
6. Appropriate Clinician explanation(s) Confirmation.

It is important that you complete all the information required in the same way that you would for a traditional paper Fast Track referral.

Within the Fast Track Recommendations section you will have the ability to change text to Bold, Italic, or Underlined.

9.2.3 About You (patient)

Gender will automatically generate if this has been added on the Personal Details page.

All available options can be selected from drop-down menus.

You have other options available to select i.e., Prefer not to answer if the patient is unwilling to provide that level of personal information about themselves.

9.2.4 Adding a Digital Signature

The signature section will appear once you have completed all the other areas of the Webform.

As the referrer your information will be automatically populated based on the information you added when you register for the Referral Portal.

This will include;

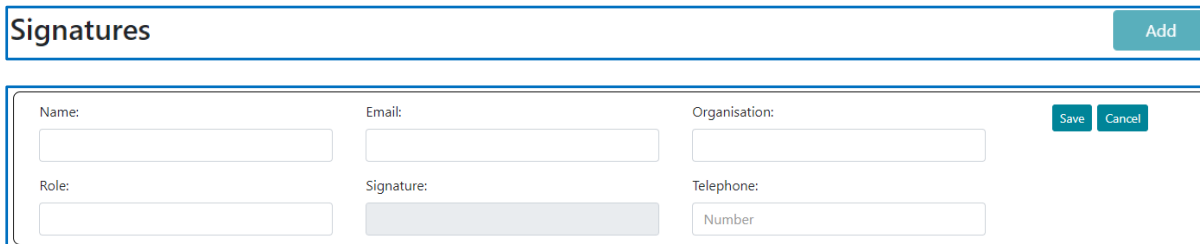
- Name
- Role
- Email
- Digital Signature
- Telephone Number (which is an editable field, so you can update it in necessary)

To add your electronic signature to the Webform, click Save.

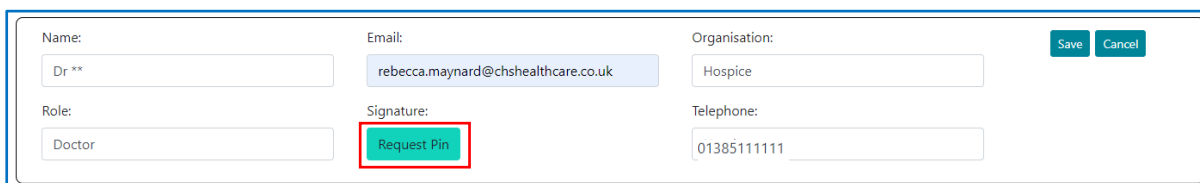
This will add a date to show when the signature was recorded and change the Save/Cancel buttons to Edit (Pencil) and Delete (Bin) icons.



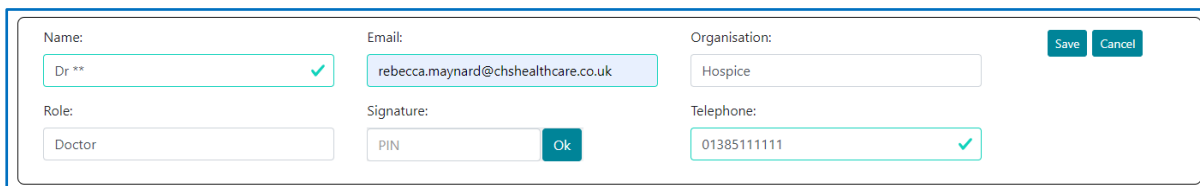
You can also add an additional signatory by clicking on the Add button and completing the information.



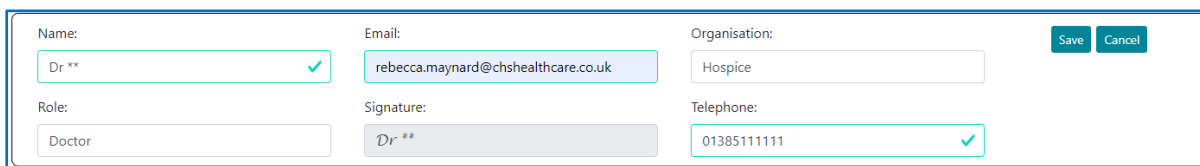
Once the information has been added, the Signature section will change to allow you to request a Pin.



This unique Pin will then be sent to the additional signatory email address.



Once this has been confirmed back to you, enter in the PIN section and click OK.

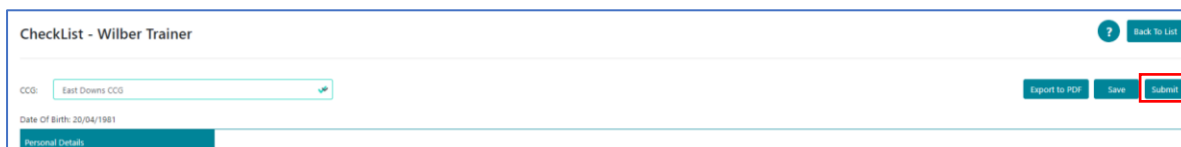


Then click Save to Date Stamp the signature.

You are now ready to Submit your Webform.

9.2.5 Submitting your Webform

Once you have fully completed the Webform click **Submit**.



You will be taken to the **New Referral** screen.

New referral

Patient Details:

CCG/HB: *
Demonstration CCG

NHS Number: *
111-111-1111

Date Of Birth: *
20/04/1943

Referral Details

Referral Type: *
Fast Track

Consent: *
Choose file No file chosen

Webform Name:
Fast Track ID2127

Other Documents:
Choose Files No file chosen

Comments:

Submit



The **Patient Details** section will be automatically populated from the Webform.

The **Referral Details** section will have the following sections (some of which you can update).

1. **Referral Type** – This will automatically populate with **Fast Track**.
2. **Consent** – If an * appears next to Consent this is because it is a Mandatory Field. To upload a Consent Document please click **Choose file** to upload the signed **Consent Document**.
3. **Webform Name** – This will automatically populate with the Digital **Fast Track ID**.
4. **Other Documents** – Click **Add** to upload **all evidence to support your referral**. The document names will appear underneath the Add button along with the delete, allowing you to delete a document if added in error. You can add up to 10 documents.

Other Documents:

Add

Care Plan Test.docx	18.8 KB	
Test.docx	18.7 KB	

5. **Comments** – This is your opportunity to add any additional comments about your referral.
6. Click **Submit** to send your Digital Fast Track Referral to the CCG/HB.

Your Digital Referral will be added to the **Referrals Screen**, and you will get the following message:

“Referral submitted successfully to <Name> CCG”

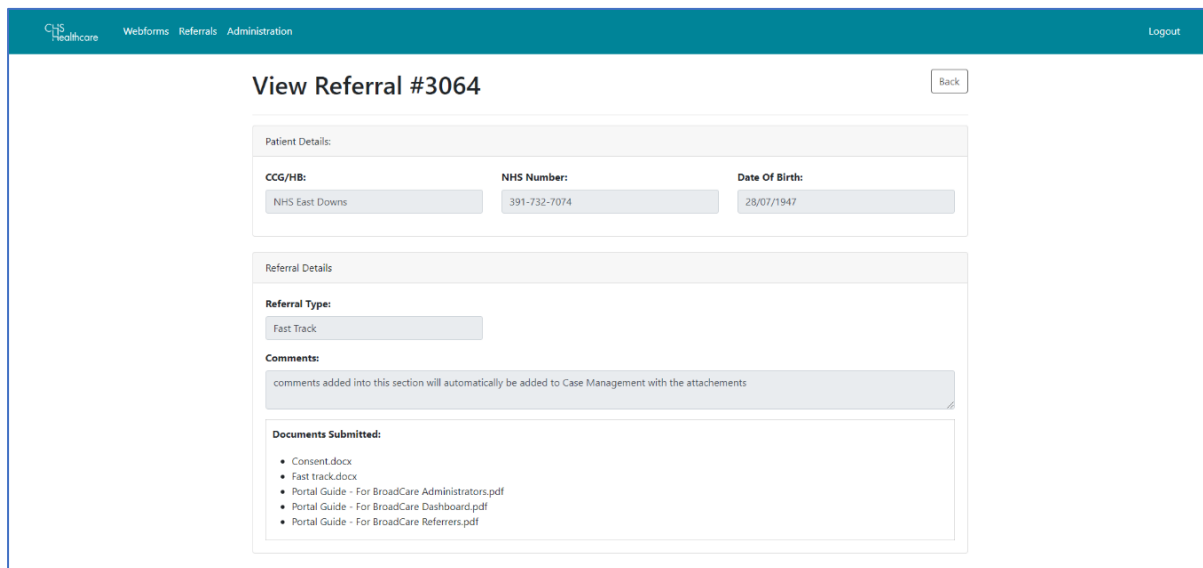
Referrals My Referrals All Referrals New Referral

Referral submitted successfully to Demonstration CCG.

To view your referral, click on the referral from the Referrals tab on the Dashboard. You will be taken to the View **Referral** screen.



The View Referral screen is non-editable and is for information only.

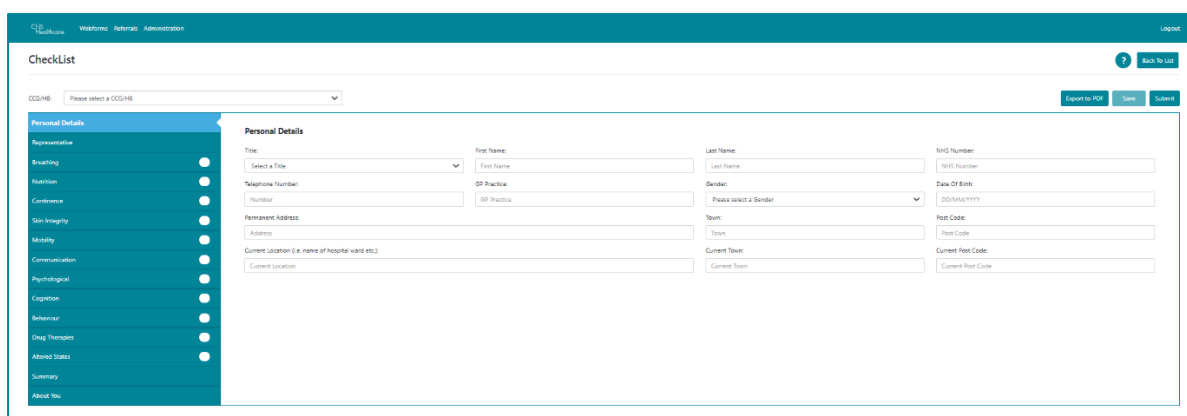


Please note All PDF documents that are downloaded will include relevant Patient Information within the header of each page.

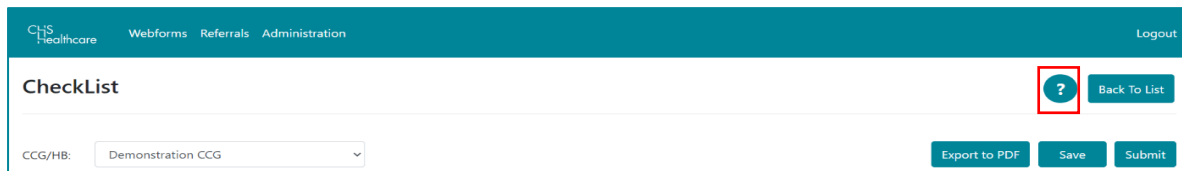
This information is automatically generated based on the data entered into the Webform used to produce the PDF document. The Personal Details section of the Webform must be completed and the Webform must be saved before the header information will be populated.

9.3 How to complete a Digital CHC Checklist/Webform

Once Checklists, then New Webform has been selected you will be presented with the below screen.

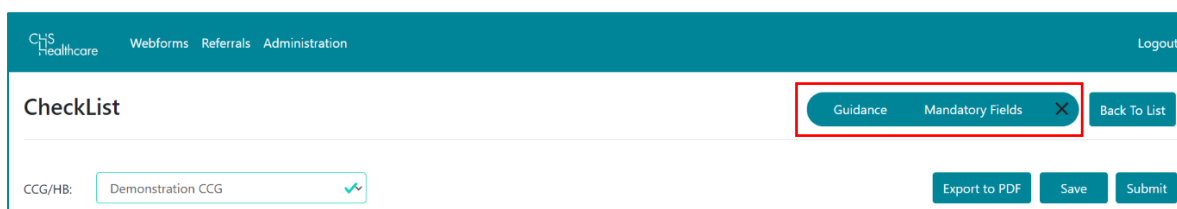


You can find the CHC Checklist guidance (the same that you would find at the start of a paper CHC Checklist) by Clicking on the ? Icon and then selecting Guidance. (This will open in PDF Format.)

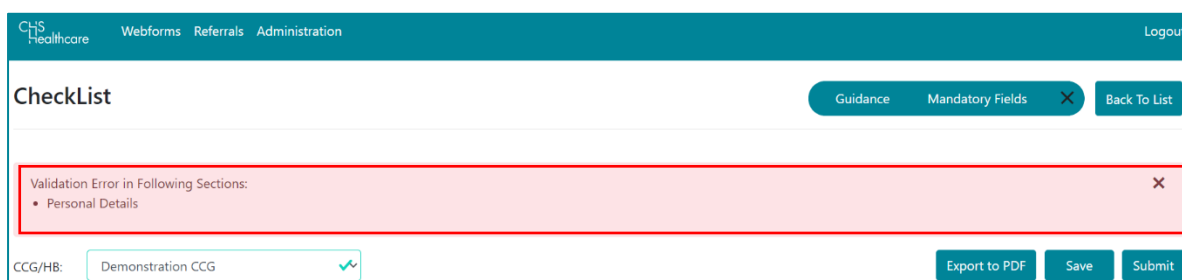


You can also find guidance on the **Mandatory Fields** here.

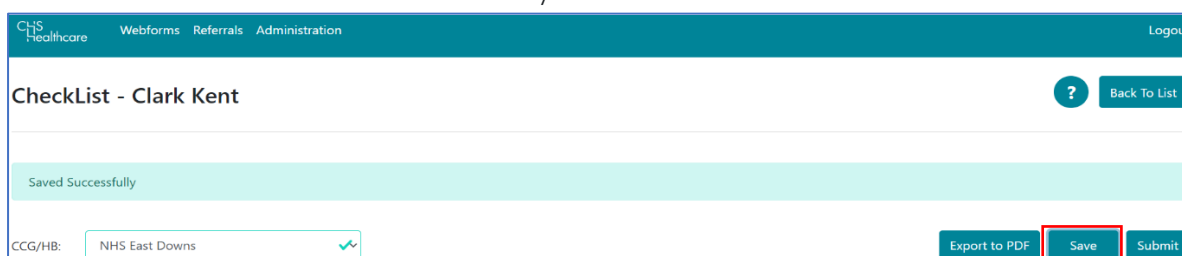
Please note you will need to select a CCG/HB from the drop down before the Mandatory Fields will appear, this is because they are unique to the CCG/HB. There are also some Minimum Fields which are an NHSE Requirement.



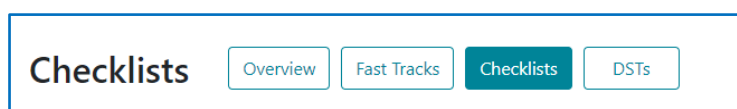
As you start to complete the Webform, you will get a **reminder** if any of the Mandatory Fields have not been completed.



You can save your Webform at any time by clicking on the **Save** Button. This will generate a notification that it has been saved successfully.



It will then appear in (and can be accessed from) the **Checklists** option on the Webforms page.



Click **Checklists** and then click on the Action Icon (three vertical dots) for the relevant Digital CHC Checklist. Select **Edit** from the pop-up menu to open it and resume your referral.

Checklists							
Overview Fast Tracks Checklists DSRs							
#	Created Date ↑	Patient ↑	DOB	NHS Number	CCG ↑	Status ↑	Edit Date ↑
2104	11-11-2020 11:10	Wilber, Trainer	20-04-1981	127-918-5759	East Downs CCG	✔	11-11-2020 11:52
							Edit Delete

9.3.1 Personal Details

CCG/HB: ✔

Date of Completion: 14/12/2020 Date Of Birth: 20/04/1937

Personal Details

Representative

Breathing ✔

Nutrition ✔

Continence ✔

Skin Integrity ✔

Mobility ✔

Communication ✔

Psychological ✔

Personal Details

Title: First Name: Last Name: NHS Number:

Telephone Number: GP Practice: Gender: Date Of Birth:

Permanent Address: Town: Post Code:

Current Location (i.e. name of hospital ward etc.): Current Town: Current Post Code:

[Export to PDF](#) [Save](#) [Submit](#)

The fields that you need to complete are:

- Title (via Dropdown Menu)
- First Name
- Last Name
- NHS Number
- Telephone Number
- GP Practice
- Gender (Via Dropdown Menu)
- Date of Birth
- Permanent Address, Town, & Postcode
- Current Location (i.e. name of Hospital Ward etc...), Town & Current Postcode

Once you complete the fields they will be marked with a green tick.

There are various validation checks that make sure that some key pieces of the information you enter is in the correct format.

9.3.2 Representative

The Representative Section asks you a series of Yes/No Questions and for the following information about the Patients Representative (if they have one).

- Name
- Telephone Number
- Address

Representative

Please ensure that the equality monitoring boxes at the end of the Checklist is completed

Was the individual involved in the completion of the Checklist? Yes/No (please tick Yes/No as appropriate)
☐ Yes ☐ No

Was the individual offered the opportunity to have a representative such as a family member or other advocate present when the Checklist was completed? Yes/No (please tick as appropriate)
☐ Yes ☐ No

If yes, did the representative attend the completion of the Checklist? Yes/No (please tick as appropriate)
☐ Yes ☐ No

Name of the Representative Representative Telephone Number

Representative Address

Did you explain to the individual how their personal information will be shared with the different organisations involved in their care, and did they consent to the information sharing? Yes/No (please tick as appropriate)
☐ Yes ☐ No

When not to screen

There will be many situations where it is not necessary to complete the Checklist. Practitioners should review the statements below on when it may not be appropriate to screen for NMS Continuing Healthcare before they start the process of completing the Checklist.

The situations where it is not necessary to complete the Checklist include:

1. It is clear to practitioners working in the health and care system that there is no need for NMS Continuing Healthcare at this point in time. Where appropriate, relevant this decision and its reasons should be recorded. If there is doubt between practitioners the Checklist should be undertaken.
2. The individual has exceptional health care needs or is recovering from a temporary condition and has not yet reached their optimum potential although if there is doubt between practitioners about the short-term nature of the needs it may be necessary to complete the Checklist. See paragraphs 106-117 of the National Framework for NMS Continuing Healthcare may interact with hospital discharge.
3. It has been agreed by the CDS that the individual should be referred directly for full assessment of eligibility for NMS Continuing Healthcare.
4. The individual has a rapidly deteriorating condition and may be entering a terminal phase - in these situations the Fast Track Pathway Tool should be used instead of the Checklist.
5. An individual is receiving palliative care under Section 117 of the Mental Health Act that are meeting all of their assessed needs.
6. It has previously been decided that the individual is not eligible for NMS Continuing Healthcare and it is clear that there has been no change in needs.

If upon review of these statements, it is deemed that it is not necessary to screen for NMS Continuing Healthcare at the time, the decision not to complete the Checklist and its reasons should be clearly recorded in the patient's notes.

9.3.3 The 11 Domains

There are 11 Domains to complete.

- Breathing
- Nutrition
- Continence
- Skin Integrity
- Mobility
- Communication
- Psychological
- Cognition
- Behaviour
- Drug Therapies
- Altered States

Each Domain section mirrors the paper Checklist. Complete each domain and provide a brief description of need and source of evidence to support the chosen level. In this section you will have the ability to change text to Bold, Italic, or Underlined.

Breathing*

☐ C ☐ B ☒ A

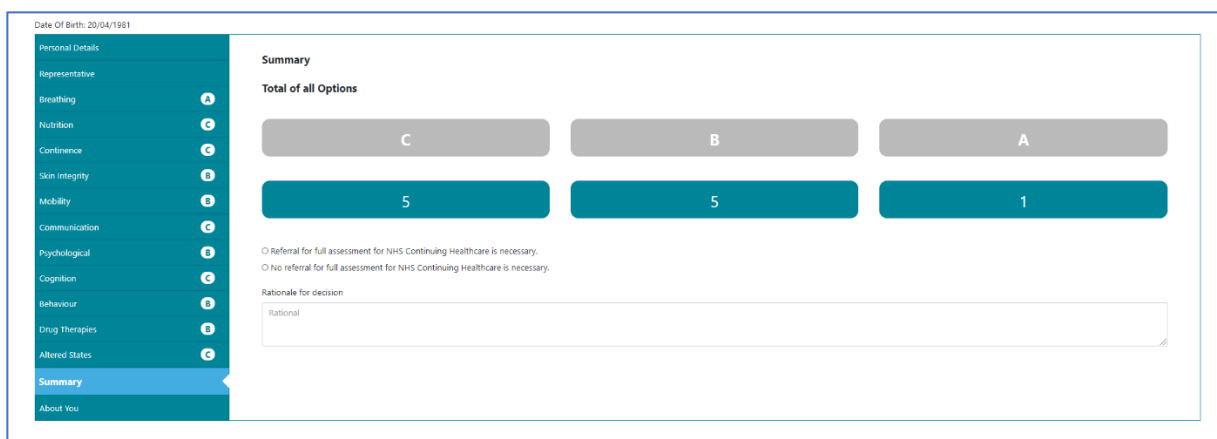
☐ Normal breathing, no issues with shortness of breath. ☐ Shortness of breath or a condition, which may require the use of inhalers or a nebuliser and limit some daily living activities. ☐ It is able to breathe independently through a tracheostomy that they can manage themselves, or with the support of carers or care workers. ☐ Breathingless, due to a condition which is not responding to therapeutic treatment and limits all daily living activities. ☐ A condition that requires management by a non-invasive device to both stimulate and maintain breathing (non-invasive positive airway pressure, or non-invasive ventilation).

☐ Shortness of breath or a condition, which may require the use of inhalers or a nebuliser and has no impact on daily living activities. ☐ Episodes of breathlessness that do not consistently respond to management and limit some daily living activities. ☐ Responds any of the following:
 - low level oxygen therapy (LTOT)
 - non-invasive ventilation (NIV)
 - other therapeutic appliances to maintain airflow when individual can still spontaneously breathe e.g. CPAP (Continuous Positive Airway Pressure) to manage obstructive apnoea during sleep.

☐ Episodes of breathlessness that readily respond to management and have no impact on daily living activities.

Brief description of need and source of evidence to support the chosen level
 Breathing brief description

9.3.4 Summary



Date Of Birth: 20/04/1981

Summary

Total of all Options

C	B	A
5	5	1

☐ Referral for full assessment for NHS Continuing Healthcare is necessary.
☐ No referral for full assessment for NHS Continuing Healthcare is necessary.

Rationale for decision

Rational

The **Summary** provides an overview of all the 11 Domains and the assigned scores.

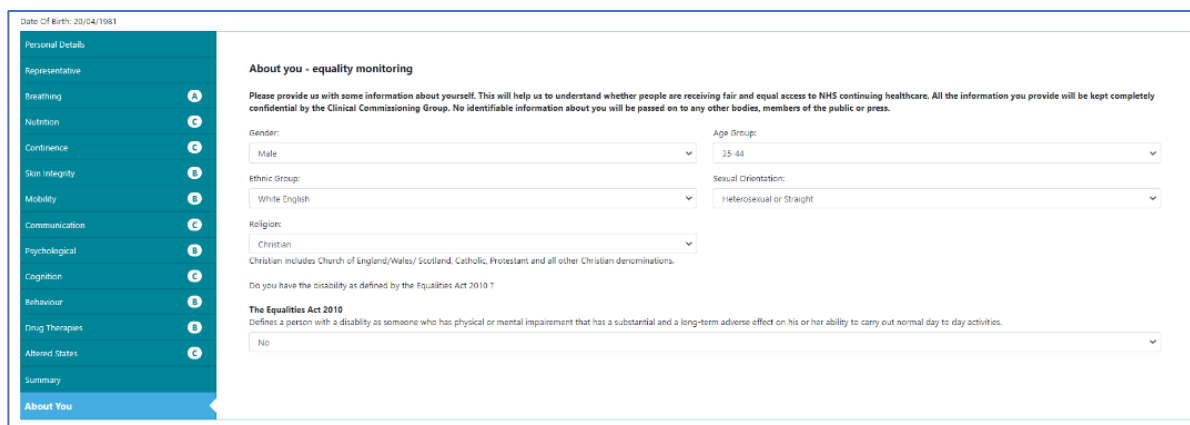
It allows you to select one of the below outcomes.

- Referral for full assessment for NHS Continuing Healthcare is necessary
- No referral for full assessment for NHS Continuing Healthcare is necessary

It also allows you to add your rationale for your decision.

9.3.5 About You (patient)

Gender will automatically generate if this has been added on the Personal Details page.



Date Of Birth: 20/04/1981

About you - equality monitoring

Please provide us with some information about yourself. This will help us to understand whether people are receiving fair and equal access to NHS continuing healthcare. All the information you provide will be kept completely confidential by the Clinical Commissioning Group. No identifiable information about you will be passed on to any other bodies, members of the public or press.

Gender: Age Group:
 Ethnic Group: Sexual Orientation:
 Religion:
 Christian includes Church of England/Wales/ Scotland, Catholic, Protestant and all other Christian denominations.

Do you have the disability as defined by the Equality Act 2010 ?

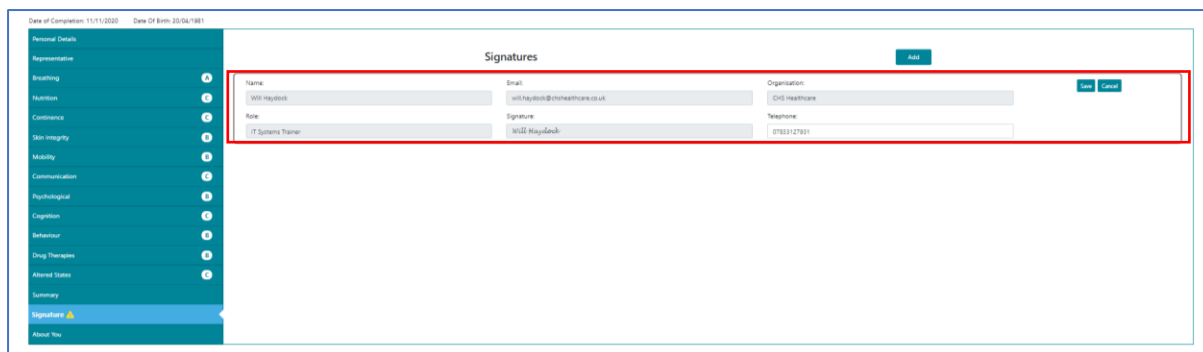
The Equality Act 2010
 Defines a person with a disability as someone who has physical or mental impairment that has a substantial and a long-term adverse effect on his or her ability to carry out normal day to day activities.

All available options can be selected from drop-down menus.

You have other options available to select i.e., Prefer not to answer if the patient is unwilling to provide that level of personal information about themselves.

9.3.6 Adding a Digital Signature

The signature section will appear once you have completed all the other areas of the Webform.

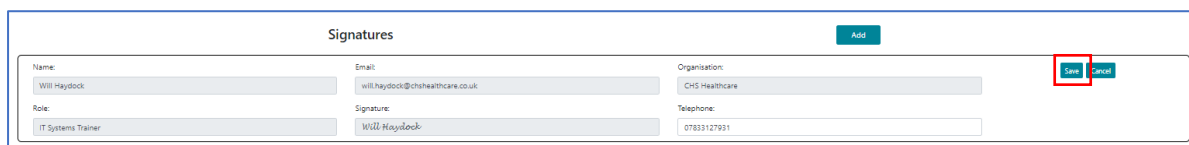


As the referrer your information will be automatically populated based on the information you added when you register for the Referral Portal.

This will include;

- Name
- Role
- Email
- Digital Signature
- Telephone Number (which is an editable field, so you can update it in necessary)

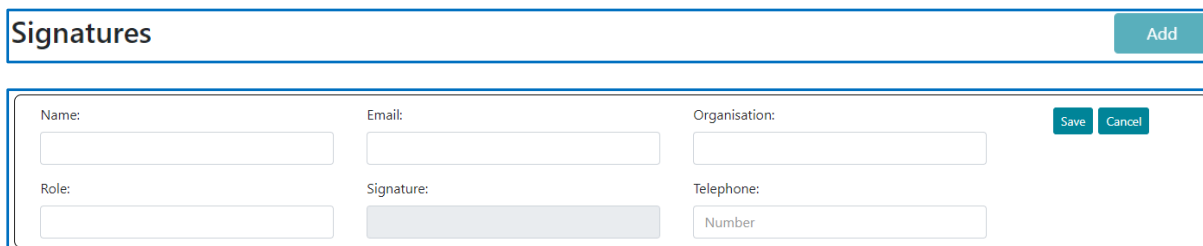
To add your electronic signature to the Webform, click Save.



This will add a date to show when the signature was recorded and change the Save/Cancel buttons to Edit (Pencil) and Delete (Bin) icons.



You can also add an additional signatory by clicking on the Add button and completing the information.



Once the information has been added, the Signature section will change to allow you to request a Pin.

Name: <input type="text" value="Dr **"/>	Email: <input type="text" value="rebecca.maynard@chshealthcare.co.uk"/>	Organisation: <input type="text" value="Hospice"/>	<input type="button" value="Save"/> <input type="button" value="Cancel"/>
Role: <input type="text" value="Doctor"/>	Signature: <input type="button" value="Request Pin"/>	Telephone: <input type="text" value="01385111111"/>	

This unique Pin will then be sent to the additional signatory email address.

Name: <input type="text" value="Dr **"/> ✓	Email: <input type="text" value="rebecca.maynard@chshealthcare.co.uk"/>	Organisation: <input type="text" value="Hospice"/>	<input type="button" value="Save"/> <input type="button" value="Cancel"/>
Role: <input type="text" value="Doctor"/>	Signature: <input type="text" value="PIN"/> <input type="button" value="Ok"/>	Telephone: <input type="text" value="01385111111"/> ✓	

Once this has been confirmed back to you, enter in the PIN section and click OK.

Name: <input type="text" value="Dr **"/> ✓	Email: <input type="text" value="rebecca.maynard@chshealthcare.co.uk"/>	Organisation: <input type="text" value="Hospice"/>	<input type="button" value="Save"/> <input type="button" value="Cancel"/>
Role: <input type="text" value="Doctor"/>	Signature: <input type="text" value="Dr **"/>	Telephone: <input type="text" value="01385111111"/> ✓	

Then click Save to Date Stamp the signature.

You are now ready to Submit your Webform.

9.3.7 Submitting your completed Digital CHC Checklist

Once you have fully completed the Webform click **Submit**.

CheckList - Clark Kent		<input type="button" value="Back To List"/>
CCG/HB: <input type="text" value="NHS East Downs"/> ✓	<input type="button" value="Export to PDF"/> <input type="button" value="Save"/> <input type="button" value="Submit"/>	
Date of Completion: 14/12/2020 Date Of Birth: 20/04/1937		

You will be taken to the **New Referral** screen.

New referral

Patient Details:

CCG/HB: *

Demonstration CCG

NHS Number: *

111-111-1111

Date Of Birth: *

20/04/1943

Referral Details

Referral Type: *

CHC

Consent: *

Choose file

No file chosen

Webform Name:

Checklist ID2104

Other Documents:

Choose Files

No file chosen

Comments:

Submit

The **Patient Details** section will be automatically populated from the Webform.

The **Referral Details** section will have the following sections (some of which you can update).



1. **Referral Type** – This will automatically populate with **CHC**.
2. **Consent** – If an * appears next to Consent this is because it is a mandatory field. To upload a Consent Document please click **Choose file** to upload the signed **Consent Document**.
3. **Webform Name** – This will automatically populate with the **Digital Checklist ID**.
4. **Other Documents** – Click **Add** to upload **all evidence to support your referral**. The document names will appear underneath the Add button along with delete, allowing you to delete a document if added in error. You can add up to 10 documents.

Other Documents:

Add

Other Documents:

Add

Care Plan Test.docx	18.8 KB	
Test.docx	18.7 KB	

5. **Comments** – This is your opportunity to add any additional comments about your referral.
6. Click **Submit** to send your Digital CHC Referral to the CCG/HB.

Your Digital Referral will be added to the **Referrals Screen**, and you will get the following message:

“Referral submitted successfully to <Name> CCG”

Referrals

My Referrals

All Referrals

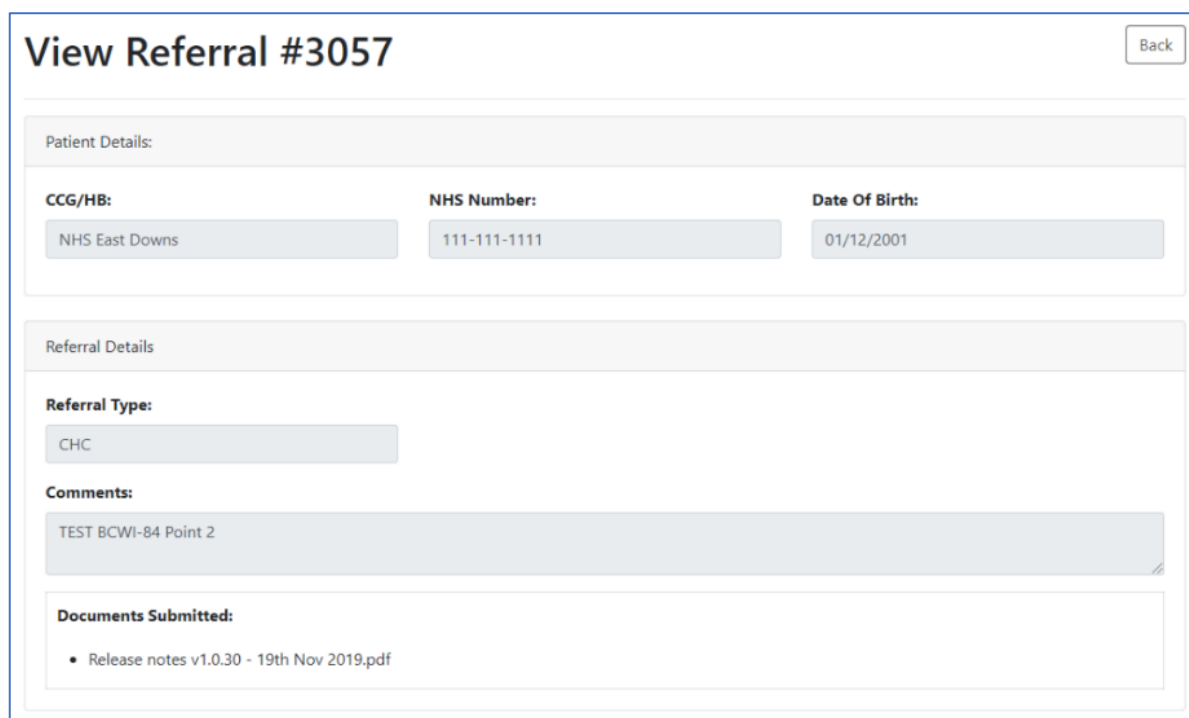
New Referral

Referral submitted successfully to Demonstration CCG.

To view your referral, click on the referral from the Referrals tab on the Dashboard. You will be taken to the **View Referral** screen.



The View Referral screen is non-editable and is for information only.



Please note all PDF documents that are downloaded will include relevant Patient Information within the header of each page.

This information is automatically generated based on the data entered into the Webform used to produce the PDF document. The Personal Details section of the Webform must be completed and the Webform must be saved before the header information will be populated.

9.4 How to complete a Digital DST/Webform

Once DST, then New Webform has been selected you will be presented with the below screen.



From the DST Screen, you can select the **Type** of DST you would like to complete.

- Blank DST – an empty Digital DST
- Annotate DST – a previously completed DST for you to annotate
- Populate DST using Checklist Data – information from a completed Digital CHC Checklist is inserted into your Digital DST

9.5 How to complete a Blank DST

You can find the DST Guidance (the same that you would find at the start of a paper DST) by clicking on the ? Icon and then selecting Guidance. (This will open in PDF Format.)

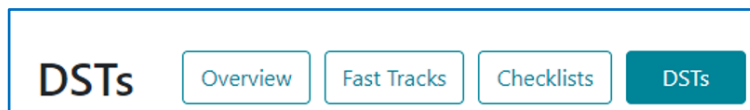
You can also find guidance on the **Mandatory Fields** here.

Please note you will need to select a CCG/HB from the drop down before the Mandatory Fields will appear, this is because they are unique to the CCG/HB. There are also some Minimum Fields which are an NHSE Requirement.

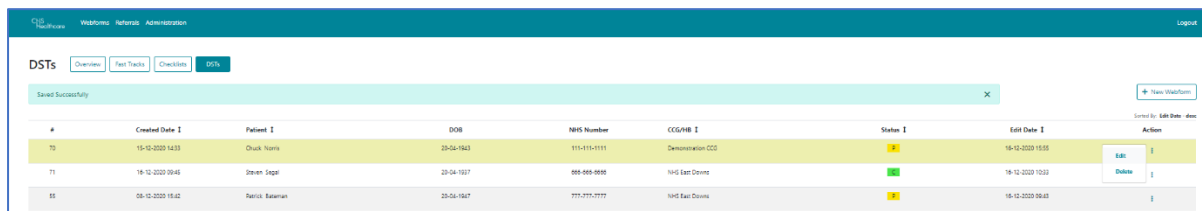
As you start to complete the Webform, you will get a **reminder** if any of the Mandatory Fields have not been completed.

You can save your Webform at any time by clicking on the **Save** Button. This will generate a notification that it has been saved successfully.

It will then appear in (and can be accessed from) the **DSTs** option on the Webforms page.

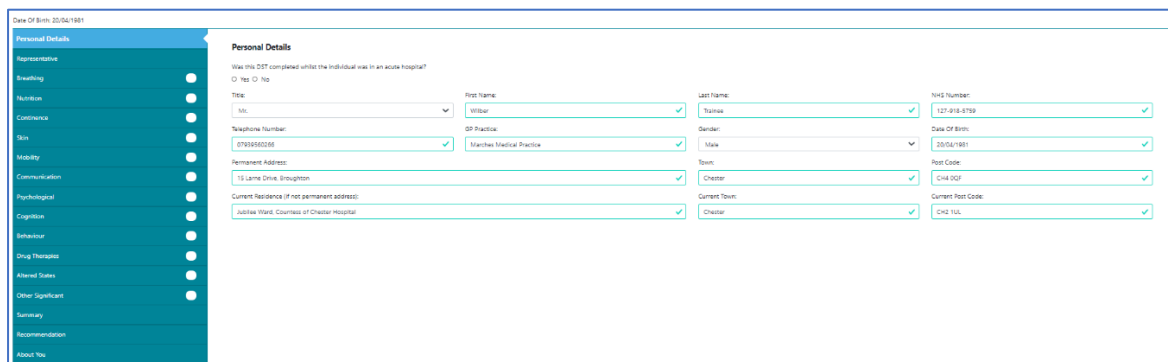


Click **DSTs** and then click on the Action Icon (three vertical dots) for the relevant Digital DST. Select **Edit** from the pop-up menu to open it and resume your referral.



#	Created Date	Patient	DOB	NHS Number	CCG/HRB	Status	Edit Date	Action
70	15-12-2020 14:33	Chuck Norris	20-04-1943	111-111-1111	Demonstration CCG	Yellow	15-12-2020 15:05	Edit
71	16-12-2020 09:45	Steven Segal	23-04-1937	888-888-8888	NHS East Devons	Green	16-12-2020 10:20	Edit
85	05-12-2020 15:42	Patrick Bateman	20-04-1947	777-777-7777	NHS East Devons	Yellow	15-12-2020 09:45	Edit

9.5.1 Personal Details



Done Of Birth (20/04/1981)

Personal Details

Was this DST completed whilst the individual was in an acute hospital?
☐ Yes ☒ No

Title: First Name: Last Name: NHS Number:

Telephone Number: GP Practice: Gender: Date Of Birth:

Permanent Address: Town: Post Code:

Current Residence (if not permanent address): Current Town: Current Post Code:

The fields that you need to complete are:

- Title (via Dropdown Menu)
- First Name
- Last Name
- NHS Number
- Telephone Number
- GP Practice
- Gender (Via Dropdown Menu)
- Date of Birth
- Permanent Address, Town, & Postcode
- Current Location (i.e. name of Hospital Ward etc...), Town & Current Postcode
- Date of completion of Decision Support Tool

Once you complete the fields they will be marked with a **green tick**.

There are various validation checks that make sure that some key pieces of the information you enter are in the correct format.

9.5.2 Representative

The Representative Section asks you a series of Yes/No Questions and for the following information about the Patients Representative (if they have one).

- Name
- Telephone Number
- Address

Representative

Please ensure that if the equality monitoring form at the end of the DST is completed

Has the individual involved in the completion of the DST? Yes/No please tick Yes/No as appropriate

Has the individual offered the opportunity to have a representative such as a family member or other advocate present when the DST was completed? Yes/No please tick Yes/No as appropriate

Has the representative offered the completion of the DST? Yes/No please tick Yes/No as appropriate

Please give the contact details of the representative (name, address and telephone number)

Name of the Representative: Representative Telephone Number:

Representative Address:

4. Summary pen portrait of the individual's situation, relevant history (particularly clinical history) and current needs, including clinical summary and identified significant risks, drawn from the multidisciplinary assessment

Summary of the individual's situation:

Individual's view of their care needs and whether they consider that the multidisciplinary assessment accurately reflects these:

Individual's view:

5. Please note below whether and how the individual (or their representative) contributed to the assessment of their needs. If they were not involved, please record whether they were not invited or whether they declined to participate

Individual's contribution to the assessment of their needs:

6. Please list the assessments and other key evidence that were considered in completing the DST, including the dates of the assessments

Assessments and other key evidence:

7. Assessors' (including MDT members) name/address/contact details noting lead coordinator

Assessor Name: Assessor Contact Number: Assessor Email:

Assessor Address:

Additional Assessors Information:

Contact details of GP and other key professionals involved in the care of the Individual. Please include which of these have contributed to the assessment of needs for the MDT to consider when completing this Decision Support Tool

Contact details:

Additionally, it asks the following questions:

- Summary pen portrait of the individual's situation, relevant history (particularly clinical history) and current needs, including clinical summary and identified significant risks, drawn from the multidisciplinary assessment.
 - Individual's view of their care needs and whether they consider that the multidisciplinary assessment accurately reflects these.
- Please note below whether and how the individual (or their representative) contributed to the assessment of their needs. If they were not involved, please record whether they were not invited or whether they declined to participate.
 - Please list the assessments and other key evidence that were considered in completing the DST, including the dates of the assessments.
- Assessors' (including MDT members) name/address/contact details noting lead coordinator.
 - Assessors Name.
 - Assessors Contact Number.
 - Assessors Email.
 - Assessors Address.
 - Additional Assessors Information.
 - Contact details of GP and other key professionals involved in the care of the Individual.

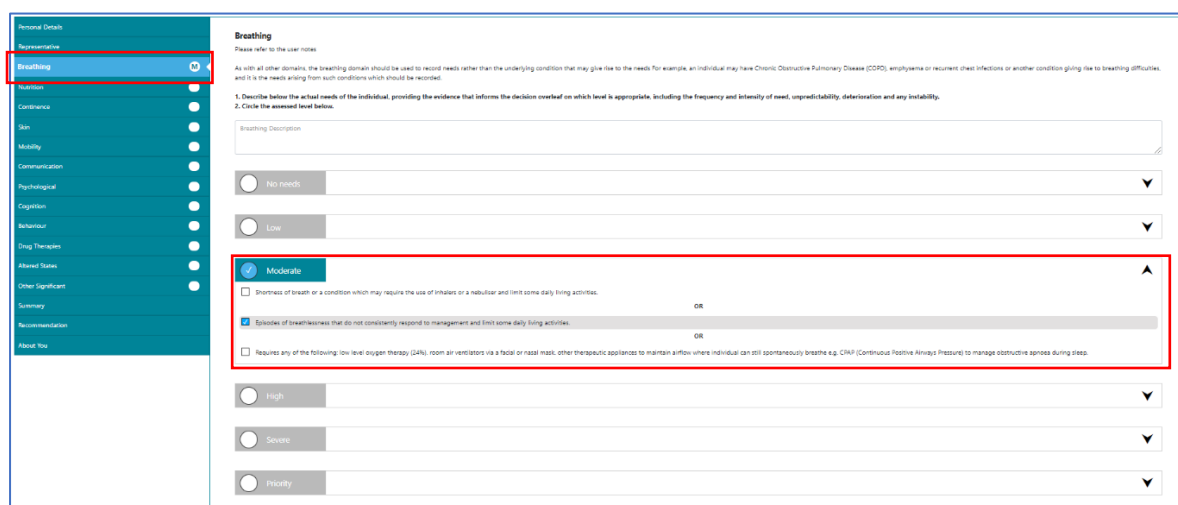
9.5.3 The 12 Domains

There are 12 Domains to complete:

- Breathing
- Nutrition
- Continence
- Skin Integrity
- Mobility
- Communication
- Psychological
- Cognition
- Behaviour
- Drug Therapies
- Altered States.
- Other Significant

Each Domain section mirrors the paper DST. Complete each domain and provide a description of need and source of evidence to support the chosen level. Within this section you will have the ability to change text to Bold, Italic, or Underlined.

For example:



Breathing

Please refer to the user notes.

As with all other domains, the breathing domain should be used to record needs rather than the underlying condition that may give rise to the needs. For example, an individual may have Chronic Obstructive Pulmonary Disease (COPD), emphysema or recurrent chest infections or another condition giving rise to breathing difficulties, and it is the needs arising from such conditions which should be recorded.

1. Describe below the actual needs of the individual, providing the evidence that informs the decision over what level is appropriate, including the frequency and intensity of need, unpredictability, deterioration and any instability.
2. Circle the assessed level below.

Breathing Description

☐ No needs

☐ Low

☒ Moderate

☐ High

☐ Severe

☐ Priority

OR

☐ Shortness of breath or a condition which may require the use of inhalers or a nebuliser and limit some daily living activities.

OR

☒ Episodes of breathlessness that do not consistently respond to management and limit some daily living activities.

OR

☐ Requires any of the following: low level oxygen therapy (24%), room air ventilators via a facial or nasal mask, other therapeutic appliances to maintain airflow where individual can still spontaneously breathe e.g. CPAP (Continuous Positive Airway Pressure) to manage obstructive apnoea during sleep.

To select the level of severity for each Domain, click on the **Arrow** to expand it and select the relevant option within the menu.

The exception to this is the final Domain section **Other Significant** which asks you to select the severity by clicking on it and then provide a detailed description of what other significant care need(s) the patient has.

Other significant care needs to be taken into consideration

Please refer to the user notes

There may be circumstances, on a case-by-case basis, where an individual may have particular needs which do not fall into the care domains described above or cannot be adequately reflected in these domains. If the boxes within each domain that give space for explanatory notes are not sufficient to document all needs, it is the responsibility of the assessor to determine and record the extent and type of these needs here. The severity of this need and its impact on the individual need to be weighted, using the professional judgement of the assessor, in a similar way to the other domains. This weighting also needs to be used in the final decision. It is important that the agreed level is consistent with the levels set out in the other domains. The availability of this domain should not be used to inappropriately affect the overall decision on eligibility.

1. Enter below a brief description of the actual needs of the individual, including providing the evidence why the level in the table overhead has been chosen (referring to appropriate risk assessments), and referring to the frequency and intensity of need, unpredictability, deterioration and any instability.
2. Circle the assessed level below.

Level of need

☐ No needs

☐ Low

☐ Moderate

☐ High

☐ Severe

Description

Other significant care needs Description

9.5.4 Summary

The Summary shows the severity for the patient under each domain as you have scored them in the Webform.

It allows you to add any additional views about the completion of the Webform that you were unable to record under each of the domains.

Personal Details

Representative

Breathing

Nutrition

Confidence

Skin

Mobility

Communication

Psychological

Cognition

Behaviour

Drug Therapies

Altered States

Other Significant

Summary

Recommendation

About You

Summary

Total of all Care Domains

Priority

Severe

High

Moderate

Low

No needs

0

1

1

5

2

3

Care Domain	Priority	Severe	High	Moderate	Low	No needs
Breathing						
Nutrition- Food and Drink						
Confidence						
Skin (including tissue viability)						
Mobility						
Communication						
Psychological and Emotional Needs						
Cognition						
Behaviour						
Drug Therapies and Medication						
Altered States of Consciousness						
Other significant care needs						

Please note below any views of the individual on the completion of the CST that have not been recorded above, including whether they agree with the domain levels selected. Where they disagree, this should be recorded below, including the reasons for their disagreement. Where the individual is represented or supported by a carer or advocate, their understanding of the individual's views should be recorded.

Individual's View

9.5.5 Recommendation

Personal Details

Representative

Breathing

Nutrition

Confidence

Skin

Mobility

Communication

Psychological

Cognition

Behaviour

Drug Therapies

Altered States

Other Significant

Summary

Recommendation

About You

Recommendation of the multi-disciplinary team filling in the CST

Please refer to the user notes

Please give a recommendation on the next page as to whether or not the individual is eligible for NHS Continuing Healthcare. This should take into account the range and levels of need recorded in the Decision Support Tool and what this tells you about whether the individual has a primary health need. Any disagreement on levels used or areas where needs have been recorded against those that one domain should be highlighted here. Reaching a recommendation on whether the individual's primary needs are health needs should include consideration of:

Relative: This describes the particular characteristics of an individual's needs which are health needs, mental health, or psychological needs, and the type of those needs. This also describes the overall effect of those needs on the individual, including the type/quantity of interventions required to manage them.

Intensity: This relates to both the extent/quantity and severity (degree) of the needs and the support required to meet them, including the need for sustained long-term care.

Complexity: This is concerned with how the needs present and impact to increase the risk required to manage the symptoms, treat the conditions and/or manage the care. This may arise with a single condition, or it could include the presence of multiple conditions or the interactions between two or more conditions. It may also include situations where an individual's response to their own condition has an impact on their overall needs, such as when a person's health need results in the individual developing a mental health need.

Unpredictability: This describes the degree to which needs fluctuate and thereby create challenges in managing them. It also relates to the level of risk to the individual's health if adequate and timely care is not provided. An individual with an unpredictable healthcare need is likely to have either a fluctuating, unstable or rapidly worsening condition.

Each of these characteristics may, alone or in combination, demonstrate a primary health need because of the quality and/or quantity of care that is required to meet the individual's needs. The severity of the overall needs and the effects of the interaction of needs should be carefully considered when completing the CST. Any choice indicates whether needs are expected to change in terms of presentation or management within the care to not increase. It is also stated why and what needs you think will be different and therefore whether you are recommending that eligibility should be agreed now or that an early review date should be set where there is no ongoing for NHS Continuing Healthcare and the assessment and care plan, as agreed with the individual, indicates the need for support in a care home setting. The team should indicate whether there is the need for regulated nursing care in the care home, giving a clear rationale based on the evidence above.

Recommendation on eligibility for NHS Continuing Healthcare detailing the conclusions on the issues. This should include the following headings: Relative, Intensity, Complexity, Unpredictability, and Recommendation.

Recommendation

Date of agreed NCH recommendation

By CST user only: Date of Eligibility Decision/Verification

The **Recommendation** section asks you to provide your recommendation on the patient's eligibility for NHS Continuing Healthcare.

Specifically detailing the conclusions on the issues, you have identified.

43 | Page

It should include the following headings:

- An Overview
- Nature
- Intensity
- Complexity
- Unpredictability
- And finally, your Recommendation

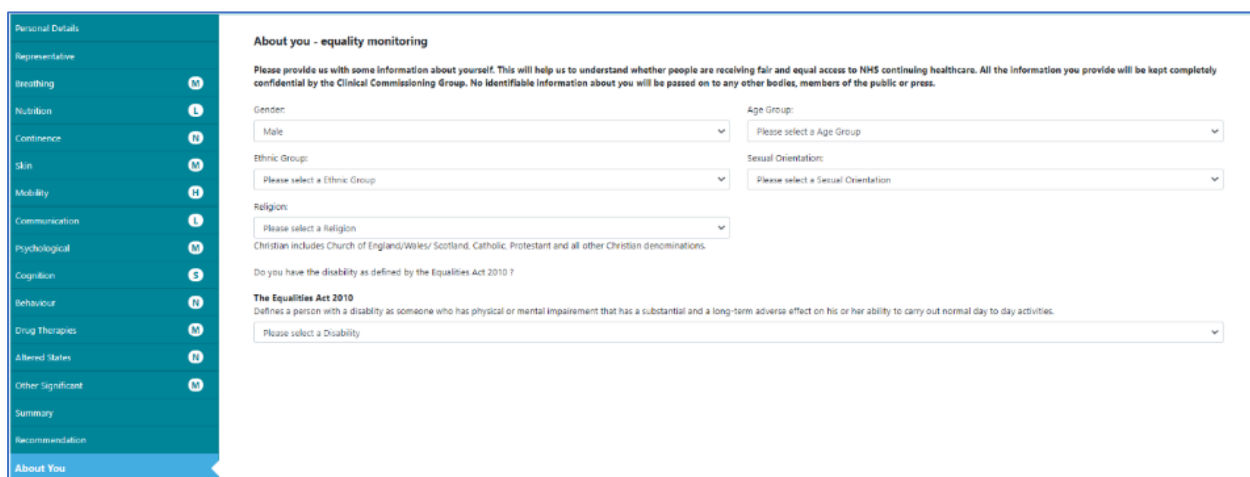
It also has two date fields to be completed:

Date of agreed MDT recommendation:	DD/MM/YYYY
for CCG use only: Date of Eligibility Decision/Verification:	DD/MM/YYYY

- Date of agreed MDT recommendation. (This will need to be completed before you can proceed).
- Date of Eligibility Decision/Verification (for CCG use only).

9.5.6 About You (patient)

Gender will automatically generate if this has been added on the Personal Details page.



About you - equality monitoring

Please provide us with some information about yourself. This will help us to understand whether people are receiving fair and equal access to NHS continuing healthcare. All the information you provide will be kept completely confidential by the Clinical Commissioning Group. No identifiable information about you will be passed on to any other bodies, members of the public or press.

Gender: Age Group:

Ethnic Group: Sexual Orientation:

Religion:
 Christian includes Church of England/Wales/ Scotland, Catholic, Protestant and all other Christian denominations.

Do you have the disability as defined by the Equalities Act 2010 ?

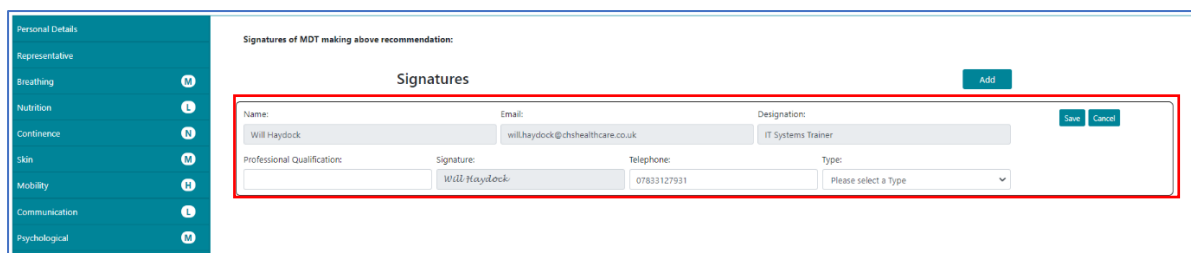
The Equalities Act 2010
 Defines a person with a disability as someone who has physical or mental impairment that has a substantial and a long-term adverse effect on his or her ability to carry out normal day to day activities.

All available options can be selected from drop-down menus.

You have other options available to select i.e., Prefer not to answer if the patient is unwilling to provide that level of personal information about themselves.

9.5.7 Adding a Digital Signature

The signature section will appear once you have completed all the other areas of the Webform.



Signatures of MDT making above recommendation:

Signatures Add

Name:	Email:	Designation:	Save Cancel
Will Haydock	will.haydock@chshealthcare.co.uk	IT Systems Trainer	
Professional Qualifications:	Signature:	Telephone:	Type:
	Will Haydock	07833127931	Please select a Type

As the referrer your information will be automatically populated based on the information you added when you register for the Referral Portal.

This will include;

- Name
- Email
- Designation
- Professional Qualification
- Digital Signature
- Telephone Number (which is an editable field, so you can update it in necessary).
- Type

To add your electronic signature the Webform, click Save.

This will add a date to show when the signature was recorded and change the Save/Cancel buttons to Edit (Pencil) and Delete (Bin) icons.

Name:	Email:	Designation:		
Rebecca Maynard	rebecca.maynard@chshealthcare.co.uk	IT Systems Trainer		
Professional Qualification:	Signature:	Telephone:	Type:	
	Rebecca Maynard	07884653322	Health professionals	12/01/2024

You can also add an additional signatory by clicking on the Add button and completing the information.

Signatures				Add
Name:	Email:	Organisation:		
			Save Cancel	
Role:	Signature:	Telephone:		
		Number		

Once the information has been added, the Signature section will change to allow you to request a Pin.

Name:	Email:	Organisation:		
Dr **	rebecca.maynard@chshealthcare.co.uk	Hospice	Save Cancel	
Role:	Signature:	Telephone:		
Doctor	Request Pin	01385111111		

This unique Pin will then be sent to the additional signatory email address.

Name:	Email:	Organisation:		
Dr ** ✓	rebecca.maynard@chshealthcare.co.uk	Hospice	Save Cancel	
Role:	Signature:	Telephone:		
Doctor	PIN Ok	01385111111 ✓		

Once this has been confirmed back to you, enter in the PIN section and click OK.

Name: <input type="text" value="Dr **"/> ✓	Email: <input type="text" value="rebecca.maynard@chshealthcare.co.uk"/>	Organisation: <input type="text" value="Hospice"/>	<input type="button" value="Save"/> <input type="button" value="Cancel"/>
Role: <input type="text" value="Doctor"/>	Signature: <input type="text" value="Dr **"/>	Telephone: <input type="text" value="01385111111"/> ✓	

Then click Save to Date Stamp the signature.

You are now ready to Submit your Webform.

9.5.8 Submitting your completed Digital DST

Once you have fully completed a Digital DST click **Submit**.

The screenshot shows the 'DST - Chuck Norris' screen. At the bottom right, there are three buttons: 'Export to DST', 'Save', and 'Submit'. The 'Submit' button is highlighted with a red box.

You will be taken to the **New Referral** screen.

New referral

Patient Details:

CCG/HB: *	NHS Number: *	Date Of Birth: *
<input type="text" value="Demonstration CCG"/>	<input type="text" value="111-111-1111"/>	<input type="text" value="20/04/1943"/>

Referral Details

Referral Type: *

①

Consent: *

No file chosen ②

Webform Name:

③

Other Documents:

No file chosen ④

Comments:

⑤

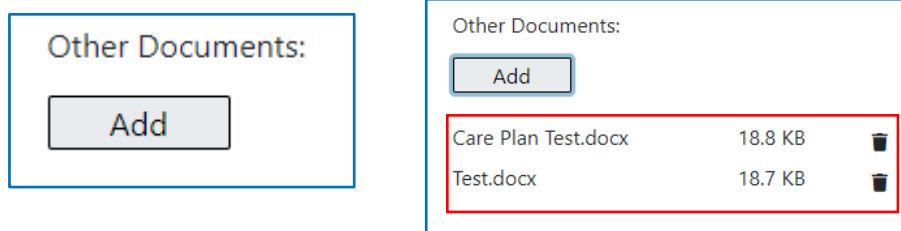
⑥

The **Patient Details** section will be automatically populated from the Webform.

The **Referral Details** section will have the following sections (some of which you can update).

1. **Referral Type** – This will automatically populate with **DST**.
2. **Consent** – If an * appears next to Consent this is because it is a mandatory field. To upload a Consent Document please click **Choose file** to upload the signed **Consent Document**.
3. **Webform Name** – This will automatically populate with the **Digital DST ID**.

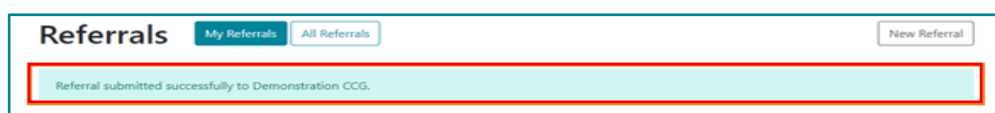
4. **Other Documents** – Click **Add** to upload **all evidence to support your referral**. The document names will appear underneath the Add button along with the delete, allowing you to delete a document if added in error. You can add up to 10 documents.



5. **Comments** – This is your opportunity to add any additional comments about your Digital DST.
6. Click **Submit** to send your Digital DST to the CCG/HB.

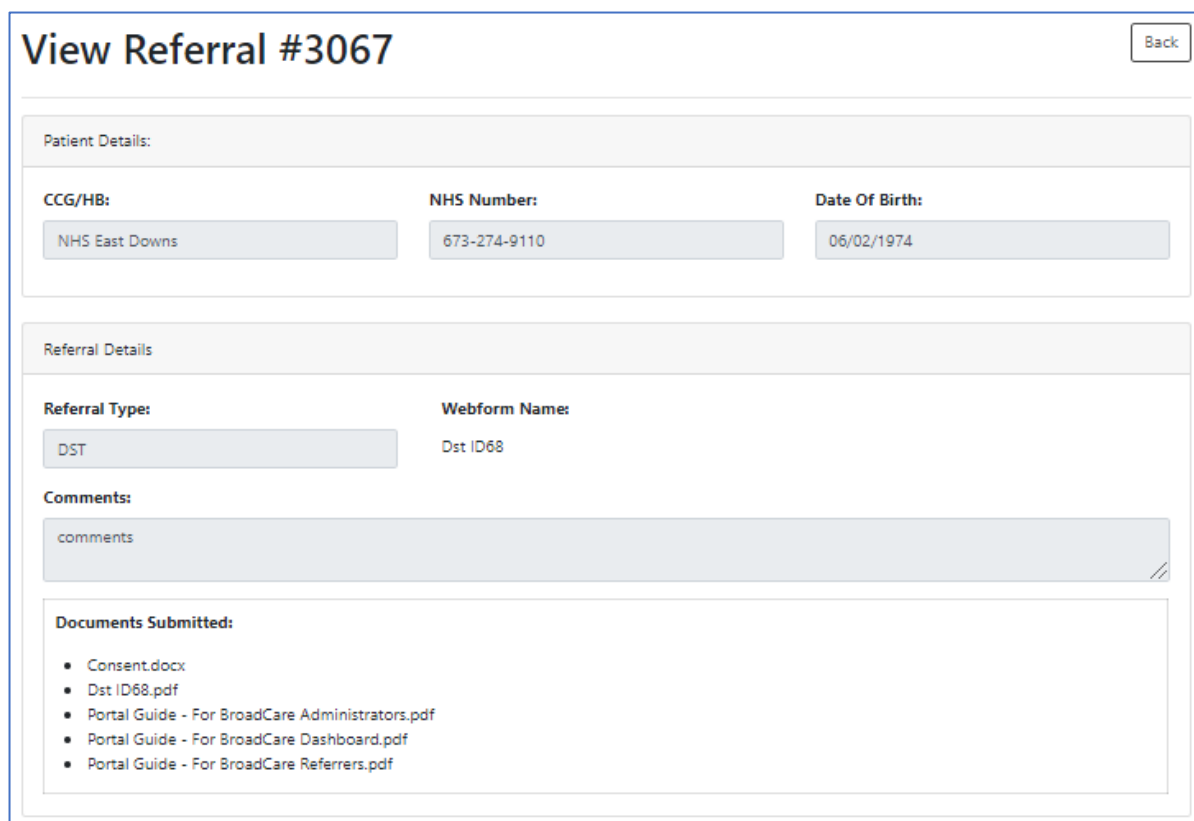
Your Digital Referral will be added to the **Referrals Screen**, and you will get the following message:

“Referral submitted successfully to <Name> CCG”



To view your referral, click on the referral from the Referrals tab on the Dashboard. You will be taken to the **View Referral** screen.

The View Referral screen is non-editable and is for information only.



Please note all PDF documents that have been digitally generated within the portal will include relevant Patient Information within the header of each page.

This information is automatically generated based on the data entered into the webform used to produce the PDF document. The Personal Details section of the Webform must be completed and the Webform must be saved before the header information will be populated.

9.6 How to complete an Annotated DST

It is important to note that when annotating an already submitted webform, you cannot change the CCG/HB that it has been submitted to. If you need to complete a webform for the patient at a new CCG/HB then you will need to create a new (blank) Digital DST/Webform.

Also, if the original DST was not completed through the Referral Portal as a Webform you will be unable to create an annotated DST, you will need to create a new (blank) Digital DST.

To access a Digital DST to Annotate, you will need enter the CCG/HB and the NHS Number of the patient who is the subject of the DST.

The Portal will search for the NHS Number and check that against your access permissions. If you do not have access to the CCG/HB that the original Webform was submitted to, you will receive the following pop-up message.

WebForm ID	Submission Date	PatientID
774	03/11/2020	5623

If you have access to the CCG/HB, you will get the following pop-up box, you can then select the correct Webform by clicking in the Action section.

Name	DOB	NHS Number	WebForm ID	Submission Date	PatientID	Action
ninth nov test	01/01/1900	111-111-1111	2052	09/11/2020	419035	<input type="radio"/>
ninth nov DST NEW test	01/01/1900	111-111-1111	2069	09/11/2020	419039	<input type="radio"/>

You will be taken to the Webform and be presented with the following reminder.

Please note that when you pre populate a DST from a previous checklist or annotate a DST from a previously submitted DST, you will be unable to change the CCG. If you wish to send the DST to a different CCG to that in which was previously submitted then please create a new blank DST.

Once read, simply click on the **X** in the top right corner of the pop-up box to close it.

You will be taken to Webform.

NHS Number: 111-111-1111

Original Created Date 09/11/2020 Date Of Birth: 01/01/1900

Personal Details

Representative

Breathing **N**

Nutrition **N**

Continence **N**

Skin **N**

Mobility **N**

Communication **N**

Psychological **N**

Cognition **N**

Behaviour **N**

Drug Therapies **N**

Altered States **N**

Other Significant **N**

Summary

Recommendation

About You

Was this DST completed whilst the individual was in an acute hospital?
No

Title: Ms. First Name: ninth nov DST NEW Last Name: test NHS Number: 111-111-1111

Telephone Number: 1111111111 GP Practice: test Gender: in another way Date Of Birth: 01/01/1900

Permanent Address: test Town: test Post Code: CV1 1AA

Current Residence (if not permanent address): test Current Town: test Current Post Code: CV1 1AA

Edit

You will be able to see all of the information that was previously populated into the DST.

Each Section within the DST will now also include the original date the Digital DST was created and an Edit button.

Click the **Edit** button in each section to make any changes or additions to the Webform.

CCG: Demonstration CCG

Date of Completion: 12/11/2020 Original Created Date 09/11/2020 Date Of Birth: 01/01/1900

Personal Details

Representative

Breathing **N**

Nutrition **N**

Continence **N**

Skin **N**

Mobility **N**

Communication **N**

Psychological **N**

Cognition **N**

Behaviour **N**

Drug Therapies **N**

Altered States **N**

Other Significant **N**

Summary

Recommendation

Signature

About You

Was this DST completed whilst the individual was in an acute hospital?
No

Title: Ms. First Name: ~~ninth nov~~ NV: Laura Last Name: test NHS Number: 111-111-1111

Telephone Number: 4444444444 GP Practice: test Gender: in another way Date Of Birth: 01/01/1900

Permanent Address: test Town: test Post Code: CV1 1AA

Current Residence (if not permanent address): test Current Town: test Current Post Code: CV1 1AA

Edit

Any changes/updates you make to the Webform will be highlighted in **blue** and the original information will be **crossed-out**, but still visible.

This allows you to Track any changes/updates you make.

The Annotated DST will also add a Date of Completion. Showing the date that you completed your annotation.

Simply navigate between the sections that you need to annotate by clicking on them.

Click **Edit** to make the necessary changes/updates.

The sections available for edit are:

- Personal Details.
- Representative.
- All of the 12 Domains.
- The individual Views element of the Summary.
- Recommendation.
- About You (patient).

Here is an example of how an updated **Domain** will appear:

The screenshot displays the 'Breathing' domain in the CHS Healthcare Referral Portal. The left sidebar shows a list of domains, with 'Breathing' selected and highlighted in blue. The main content area shows the 'Breathing' domain details. At the top, it says 'Please refer to the user notes' and 'PV Option: No needs'. Below this, it says 'PV SubOptions: Normal breathing, no issues with shortness of breath.' The main text area contains instructions: '1. Describe below the actual needs of the individual, providing the evidence that informs the decision overleaf on which level is appropriate, including the frequency and intensity of need, unpredictability, deterioration and any instability. 2. Circle the assessed level below.' The 'test' section has a text box with a green checkmark. Below the text box are three radio button options: 'No needs', 'Low', and 'Moderate'. The 'Moderate' option is selected, indicated by a blue checkmark. Below the radio buttons are three checkboxes: 'Shortness of breath or a condition which may require the use of inhalers or a nebuliser and limit some daily living activities.', 'Episodes of breathlessness that do not consistently respond to management and limit some daily living activities.', and 'Requires any of the following: low level oxygen therapy (24%), room air ventilators via a facial or nasal mask, other therapeutic appliances to maintain airflow where individual can still spontaneously breathe e.g. CPAP (Continuous Positive Airways Pressure) to manage obstructive apnoea during sleep.' The 'Moderate' option is selected, indicated by a blue checkmark. Below the checkboxes are three radio button options: 'High', 'Severe', and 'Priority'. The 'Moderate' option is selected, indicated by a blue checkmark.

The previous selection will appear at the top of the screen.

The original description of the actual needs of the patient will appear ~~crossed-out~~. You can revert back to that description by clicking the undo **Arrow** Icon.

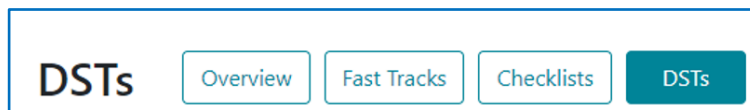
Your new selection will update the 'score' in the sections menu on the left of the screen.

Within the free text box you will have the ability to change text to Bold, Italic, or Underlined.

You can save your Webform at any time by clicking on the **Save** Button. This will generate a notification that it has been saved successfully.

The screenshot displays the 'DST - Chuck Norris' form in the CHS Healthcare Referral Portal. The top navigation bar shows 'CHS Healthcare', 'Webforms', 'Referrals', and 'Administration'. The user is logged in as 'DST - Chuck Norris'. A green notification bar at the top says 'Saved Successfully'. Below the notification bar, there is a text box with 'CGG#B: Demonstration CGG'. At the bottom, there is a 'Data Of Birth: 20/04/1943' and a 'Logout' button. The bottom right corner has buttons for 'Export to PDF', 'Save', and 'Submit'.

It will then appear in (and can be accessed from) the **DSTs** option on the Webforms page.



Click **DSTs** and then click on the Action Icon (three vertical dots) for the relevant Digital DST. Select **Edit** from the pop-up menu to open it and resume your referral.

#	Created Date	Patient	DOB	NHS Number	CCG/HRB	Status	Edit Date	Action
70	15-12-2020 14:33	Chuck Harris	25-04-1963	111-111-1111	Demonstration CCG	Yellow	15-12-2020 15:05	Edit
71	16-12-2020 09:45	Steven Sagal	23-04-1937	888-888-8888	NHS East Devon	Green	16-12-2020 10:20	Edit
85	05-12-2020 15:42	Patrick Berman	25-04-1987	777-777-7777	NHS East Devon	Yellow	15-12-2020 09:45	Edit

9.6.1 Adding a Digital Signature

The signature section will appear once you have completed all the other areas of the Webform.

As the referrer your information will be automatically populated based on the information you added when you register for the Referral Portal.

This will include;

- Name
- Email
- Designation
- Professional Qualification
- Digital Signature
- Telephone Number (which is an editable field, so you can update it in necessary).
- Type

To add your electronic signature the Webform, click Save.

This will add a date to show when the signature was recorded and change the Save/Cancel buttons to Edit (Pencil) and Delete (Bin) icons.

You can also add an additional signatory by clicking on the Add button and completing the information.

Once the information has been added, the Signature section will change to allow you to request a Pin.

Name: <input type="text" value="Dr **"/>	Email: <input type="text" value="rebecca.maynard@chshealthcare.co.uk"/>	Organisation: <input type="text" value="Hospice"/>	<input type="button" value="Save"/> <input type="button" value="Cancel"/>
Role: <input type="text" value="Doctor"/>	Signature: <input type="button" value="Request Pin"/>	Telephone: <input type="text" value="01385111111"/>	

This unique Pin will then be sent to the additional signatory email address.

Name: <input type="text" value="Dr **"/> ✓	Email: <input type="text" value="rebecca.maynard@chshealthcare.co.uk"/>	Organisation: <input type="text" value="Hospice"/>	<input type="button" value="Save"/> <input type="button" value="Cancel"/>
Role: <input type="text" value="Doctor"/>	Signature: <input type="text" value="PIN"/> <input type="button" value="Ok"/>	Telephone: <input type="text" value="01385111111"/> ✓	

Once this has been confirmed back to you, enter in the PIN section and click OK.

Name: <input type="text" value="Dr **"/> ✓	Email: <input type="text" value="rebecca.maynard@chshealthcare.co.uk"/>	Organisation: <input type="text" value="Hospice"/>	<input type="button" value="Save"/> <input type="button" value="Cancel"/>
Role: <input type="text" value="Doctor"/>	Signature: <input type="text" value="Dr **"/>	Telephone: <input type="text" value="01385111111"/> ✓	

Then click Save to Date Stamp the signature.

You are now ready to Submit your Webform.

9.6.2 Submitting your completed Digital DST

Once you have fully completed a Digital DST click **Submit**.



You will be taken to the **New Referral** screen.

New referral

Patient Details:

CCG/HB: * NHS Number: * Date Of Birth: *

Demonstration CCG 111-111-1111 20/04/1943

Referral Details

Referral Type: *

DST 1

Consent: * Webform Name: Other Documents:

Choose file No file chosen 2 Dst ID2130 3 Choose Files No file chosen 4

Comments:

5

Submit 6

The **Patient Details** section will be automatically populated from the Webform.

The **Referral Details** section will have the following sections (some of which you can update).



1. **Referral Type** – This will automatically populate with **DST**.
2. **Consent** – If an * appears next to Consent this is because it is a mandatory field. To upload a Consent Document please click **Choose file** to upload the signed **Consent Document**.
3. **Webform Name** – This will automatically populate with the **Digital DST ID**.
4. **Other Documents** – Click **Add** to upload **all evidence to support your referral**. The document names will appear underneath the Add button along with the delete, allowing you to delete a document if added in error. You can add up to 10 documents.

Other Documents:

Add

Other Documents:

Add

Care Plan Test.docx	18.8 KB	
Test.docx	18.7 KB	

5. **Comments** – This is your opportunity to add any additional comments about your Digital DST.
6. Click **Submit** to send your Digital DST to the CCG/HB.

Your Digital Referral will be added to the **Referrals Screen**, and you will get the following message:

“Referral submitted successfully to <Name> CCG”

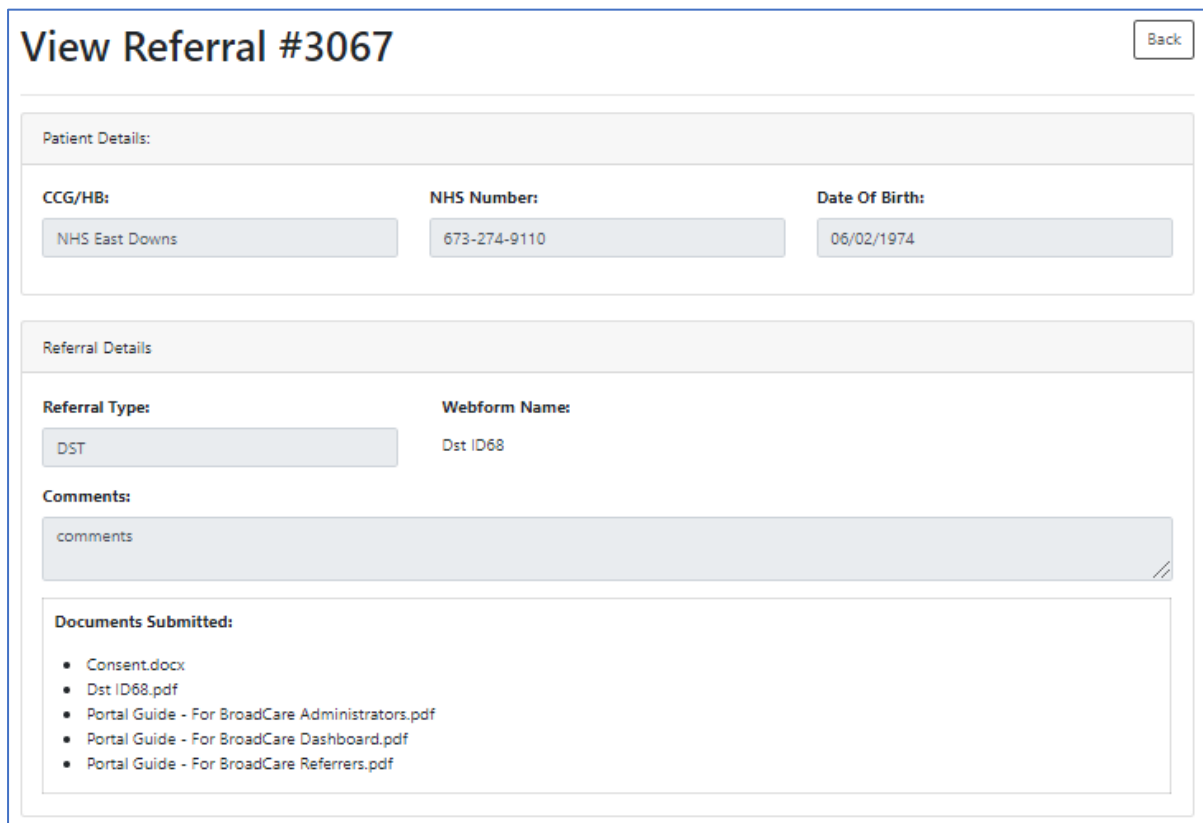
Referrals My Referrals All Referrals New Referral

Referral submitted successfully to Demonstration CCG.

To view your referral, click on the referral from the Referrals tab on the Dashboard. You will be taken to the **View Referral** screen.



The View Referral screen is non-editable and is for information only.



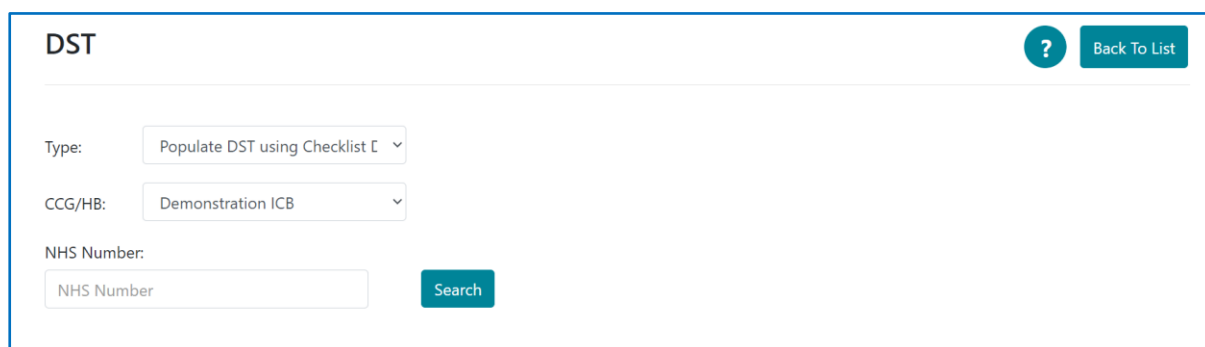
Please note all PDF documents that have been digitally generated within the portal will include relevant Patient Information within the header of each page.

This information is automatically generated based on the data entered into the webform used to produce the PDF document. The Personal Details section of the Webform must be completed and the Webform must be saved before the header information will be populated.

9.7 How to complete a Digital DST using Checklist data

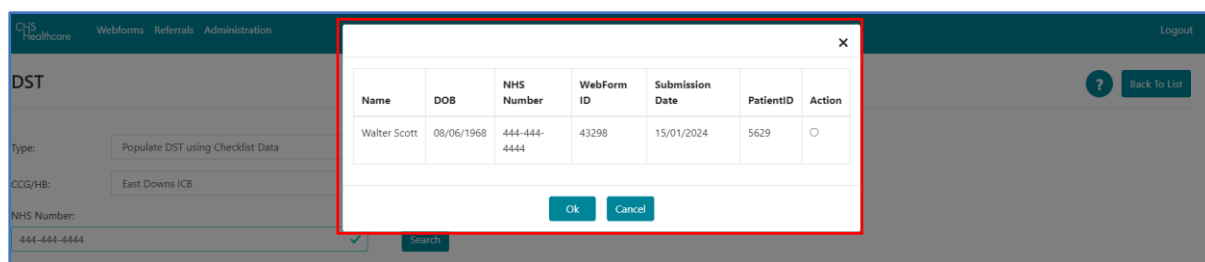
It is important to note that when searching for a DST using Checklist data, it will only locate the Patient if the Checklist was previously submitted as a Webform through the Referral Portal to the same CCG/HB you wish to complete the DST for. If you need to complete a DST webform using Checklist data for the patient at a new CCG/HB then you will need to create a new (blank) Digital DST/Webform.

To access a Digital DST using Checklist data, you will need enter the CCG/HB and the NHS Number of the patient who is the subject of the DST.



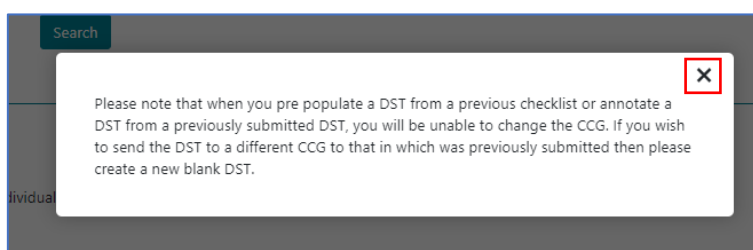
The Portal will search for the NHS Number and check that against your access permissions. If you do not have access to the CCG/HB that the original Webform was submitted to you will be unable to access the information to complete the DST using Checklist Data.

If you have access to the CCG/HB, you will get the following pop-up box, you can then select the correct Webform by clicking in the Action section.



Name	DOB	NHS Number	WebForm ID	Submission Date	PatientID	Action
Walter Scott	08/06/1968	444-444-4444	43298	15/01/2024	5629	<input type="radio"/>

You will be taken to the Webform and be presented with the following reminder.



Please note that when you pre populate a DST from a previous checklist or annotate a DST from a previously submitted DST, you will be unable to change the CCG. If you wish to send the DST to a different CCG to that in which was previously submitted then please create a new blank DST.

Once read, simply click on the **X** in the top right corner of the pop-up box to close it.

You will be taken to Webform.

You can find the DST Guidance (the same that you would find at the start of a paper DST) by clicking on the **?** Icon and then selecting Guidance. (This will open in PDF Format.)



You can also find guidance on the **Mandatory Fields** here.

Please note you will need to select a CCG/HB from the drop down before the Mandatory Fields will appear, this is because they are unique to the CCG/HB. There are also some Minimum Fields are an NHSE Requirement.

You can save your Webform at any time by clicking on the **Save** Button. This will generate a notification that it has been saved successfully.

9.7.1 Personal Details

The webform will be pre-populated from the Checklist Data with the Personal Details. These can be amended if required. There will also be two additional fields on this section to complete.

9.7.2 Representative

The Representative Section asks you a series of Yes/No Questions and for the following information about the Patients Representative (if they have one).

- Name
- Telephone Number
- Address

Additionally, it asks the following questions:

- d) Summary pen portrait of the individual's situation, relevant history (particularly clinical history) and current needs, including clinical summary and identified significant risks, drawn from the multidisciplinary assessment.
 - Individual's view of their care needs and whether they consider that the multidisciplinary assessment accurately reflects these.
- e) Please note below whether and how the individual (or their representative) contributed to the assessment of their needs. If they were not involved, please record whether they were not invited or whether they declined to participate.
 - Please list the assessments and other key evidence that were considered in completing the DST, including the dates of the assessments.
- f) Assessors' (including MDT members) name/address/contact details noting lead coordinator.
 - Assessors Name.
 - Assessors Contact Number.
 - Assessors Email.
 - Assessors Address.
 - Additional Assessors Information.
 - Contact details of GP and other key professionals involved in the care of the Individual.

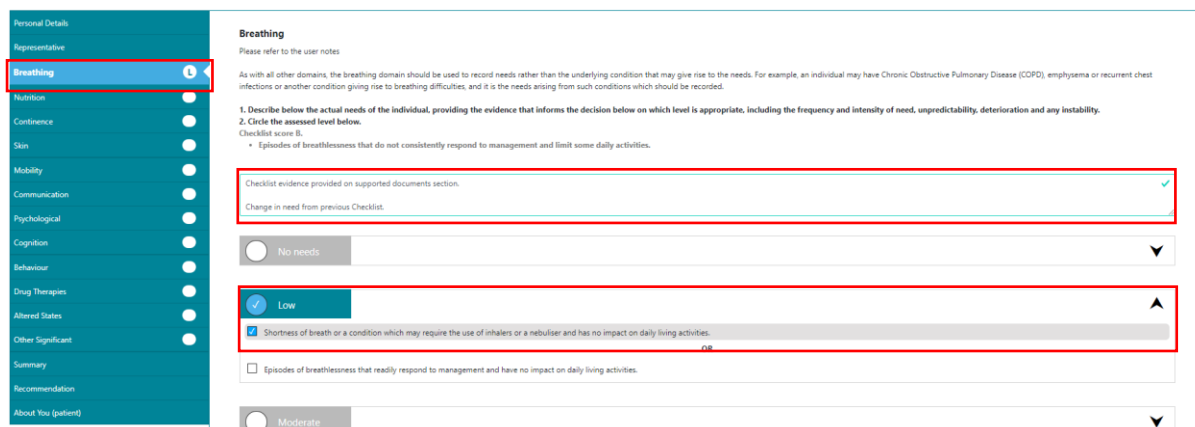
9.7.3 The 12 Domains

There are 12 Domains to complete:

- Breathing
- Nutrition
- Continence
- Skin Integrity
- Mobility
- Communication
- Psychological
- Cognition
- Behaviour
- Drug Therapies
- Altered States.
- Other Significant

Each Domain section mirrors the paper DST. Complete each domain, a description will be pre-populated for you from the Checklist Data on each section, this can be amended or further information added to support the chosen level. Within this section you will have the ability to change text to Bold, Italic, or Underlined.

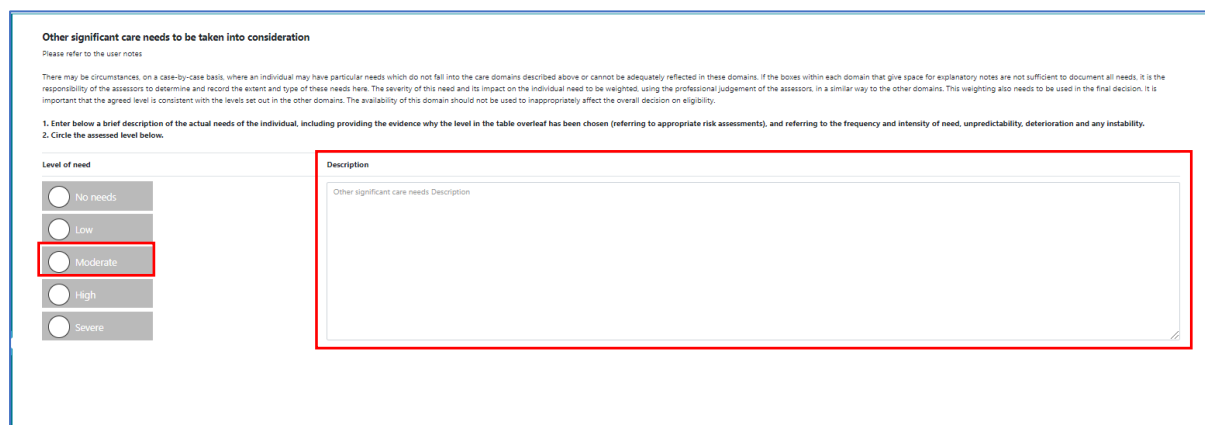
For example:



The screenshot shows the 'Breathing' domain assessment form. On the left is a sidebar with various domains: Personal Details, Representative, Breathing (highlighted with a red box), Nutrition, Continence, Skin, Mobility, Communication, Psychological, Cognition, Behaviour, Drug Therapies, Altered States, Other Significant, Summary, Recommendation, and About You (patient). The main content area is titled 'Breathing' and includes instructions to refer to user notes. It contains two sections for assessment: '1. Describe below the actual needs of the individual...' and '2. Circle the assessed level below.' Under section 2, there are radio buttons for 'No needs', 'Low' (selected with a blue dot), and 'Moderate'. Below the 'Low' option, there is a text box with a red border containing the text: 'Shortness of breath or a condition which may require the use of inhalers or a nebuliser and has no impact on daily living activities.' There is also a checkbox for 'Episodes of breathlessness that readily respond to management and have no impact on daily living activities.' and a 'Change in need from previous Checklist' section.

To select the level of severity for each Domain, click on the **Arrow** to expand it and select the relevant option within the menu.

The exception to this is the final Domain section **Other Significant**. As this section is not required on a checklist it will not be pre populated on the DST.



The screenshot shows the 'Other significant care needs to be taken into consideration' section. It includes instructions to refer to user notes and a paragraph explaining that this section is for needs not covered by the other domains. It contains two sections: '1. Enter below a brief description of the actual needs of the individual...' and '2. Circle the assessed level below.' Under section 2, there are radio buttons for 'No needs', 'Low', 'Moderate' (selected with a blue dot), 'High', and 'Severe'. To the right of the radio buttons is a large text box with a red border for the 'Description' of the other significant care needs.

Other Significant asks you to select the severity by clicking on it and then provide a detailed description of what other significant care need(s) the patient has.

9.7.4 Summary

The Summary shows the severity for the patient under of each domain as you have scored them in the Webform.

It allows you to add any additional views about the completion of the Webform that you were unable to record under each of the domains.

Summary

Total of all Care Domains

Priority	Severe	High	Moderate	Low	No needs
0	1	1	5	2	3

Care Domain	Priority	Severe	High	Moderate	Low	No needs
Enabling				✓	✓	
Nutrition: Food and Drink					✓	
Continence						✓
Skin (including tissue viability)				✓		
Mobility			✓		✓	
Communication					✓	
Psychological and Emotional needs				✓		
Cognition		✓				
Behaviour						✓
Drug Therapies and Medication				✓		
Altered States of Consciousness						✓
Other significant care needs				✓		

Please note below any views of the individual on the completion of the DST that have not been recorded above, including whether they agree with the domain levels selected. Where they disagree, this should be recorded below, including the reasons for their disagreement. Where the individual is represented or supported by a carer or advocate, their understanding of the individual's views should be recorded.

Individual's View

9.7.5 Recommendation

The **Recommendation** section asks you to provide your recommendation on the patient's eligibility for

Recommendation of the multidisciplinary team filling in the DST

Please refer to the user notes.

Please give a recommendation on the next page as to whether or not the individual is eligible for NHS Continuing Healthcare. This should take into account the range and levels of need recorded in the Decision Support Tool and what this tells you about whether the individual has a primary health need. Any disagreement on levels used or areas where needs have been counted against more than one domain should be highlighted here. Reaching a recommendation on whether the individual's primary needs are health needs should include consideration of:

Nature: This describes the particular characteristics of an individual's needs (which can include physical, mental health or psychological needs), and the type of those needs. This also describes the overall effect of those needs on the individual, including the type (quantity) of interventions required to manage them.

Intensity: This relates to both the extent (quantity) and severity (degree) of the needs and the support required to meet them, including the need for sustained long-term care (continuity).

Complexity: This is concerned with how the needs present and interact to increase the skill required to monitor the symptoms, treat the conditions and/or manage the care. This may arise with a single condition, or it could include the presence of multiple conditions or the interactions between two or more conditions. It may also include situations where an individual's response to their own condition has an impact on their overall needs, such as when a physical health need results in the individual developing a mental health need.

Unpredictability: This describes the degree to which needs fluctuate and thereby create challenges in managing them. It also relates to the level of risk to the individual's health if adequate and timely care is not provided. An individual with an unpredictable healthcare need is likely to have either a fluctuating, unstable or rapidly deteriorating condition.

Each of these characteristics may, alone or in combination, demonstrate a primary health need, because of the quality and/or quantity of care that is required to meet the individual's needs. The totality of the overall needs and the effects of the interaction of needs should be carefully considered when completing the DST.

Also please indicate whether needs are expected to change (in terms of deterioration or improvement) before the case is next reviewed. If so, please state why and what needs you think will be different and therefore whether you are recommending that eligibility should be agreed now or that an early review date should be set. Where there is no eligibility for NHS Continuing Healthcare and the assessment and care plan, as agreed with the individual, indicates the need for support in a care home setting, the team should indicate whether there is the need for registered nursing care in the care home, giving a clear rationale based on the evidence above.

Recommendation on eligibility for NHS Continuing Healthcare detailing the conclusions on the issues. This should include the following headings:

Overview: Nature: Intensity: Complexity: Unpredictability: and Recommendation.

Recommendation:

Date of agreed MDT recommendation: DD/MM/YYYY

For CCG use only: Date of Eligibility Decision/Verification: DD/MM/YYYY

NHS Continuing Healthcare.

Specifically detailing the conclusions on the issues, you have identified.

It should include the following headings:

- An Overview
- Nature
- Intensity
- Complexity
- Unpredictability
- And finally, your Recommendation

It also has two date fields to be completed:

Date of agreed MDT recommendation: DD/MM/YYYY

for CCG use only: Date of Eligibility Decision/Verification: DD/MM/YYYY

- Date of agreed MDT recommendation. (This will need to be completed before you can proceed).
- Date of Eligibility Decision/Verification (for CCG use only).

9.7.6 About You (patient)

All fields will be automatically pre-populated from the Checklist Data, but can be updated/amended if required.

9.7.7 Adding a Digital Signature

The signature section will appear once you have completed all the other areas of the Webform.

As the referrer your information will be automatically populated based on the information you added when you register for the Referral Portal.

This will include;

- Name
- Email
- Designation
- Professional Qualification
- Digital Signature
- Telephone Number (which is an editable field, so you can update it in necessary).
- Type

To add your electronic signature the Webform, click Save.

This will add a date to show when the signature was recorded and change the Save/Cancel buttons to Edit (Pencil) and Delete (Bin) icons.

You can also add an additional signatory by clicking on the Add button and completing the information.

Signatures

Add

Name:	Email:	Organisation:	Save	Cancel
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Role:	Signature:	Telephone:		
<input type="text"/>	<input type="text"/>	Number <input type="text"/>		

Once the information has been added, the Signature section will change to allow you to request a Pin.

Name:	Email:	Organisation:	Save	Cancel
Dr **	rebecca.maynard@chshealthcare.co.uk	Hospice		
Role:	Signature:	Telephone:		
Doctor	Request Pin	01385111111		

This unique Pin will then be sent to the additional signatory email address.

Name:	Email:	Organisation:	Save	Cancel
Dr ** ✓	rebecca.maynard@chshealthcare.co.uk	Hospice		
Role:	Signature:	Telephone:		
Doctor	PIN <input type="text"/> Ok	01385111111 ✓		

Once this has been confirmed back to you, enter in the PIN section and click OK.

Name:	Email:	Organisation:	Save	Cancel
Dr ** ✓	rebecca.maynard@chshealthcare.co.uk	Hospice		
Role:	Signature:	Telephone:		
Doctor	Dr **	01385111111 ✓		

Then click Save to Date Stamp the signature.

You are now ready to Submit your Webform.

9.7.8 Submitting your completed Digital DST

Once you have fully completed a Digital DST click **Submit**.



You will be taken to the **New Referral** screen.

New referral

Patient Details:

CCG/HB: *

East Downs ICB

NHS Number: *

444-444-4444

Date Of Birth: *

08/06/1968

Additional Patient Details

Ethnic Origin: *

White British

Title: *

Mr.

Forename: *

Walter

Surname: *

Scott

Address: *

1 Walter

Town: *

Scott

Postcode: *

AA0 0AA

Referral Details

Referral Type: *

DST

Consent: *

Choose File

No file chosen

Webform Name:

Dst ID43308

Other Documents:

Choose Files

No file chosen

Comments:

Submit

The **Patient Details** section will be automatically populated from the Webform.

The **Referral Details** section will have the following sections (some of which you can update).



- **Referral Type** – This will automatically populate with **DST**.
- **Consent** – If an * appears next to Consent this is because it is a mandatory field. To upload a Consent Document please click **Choose file** to upload the signed **Consent Document**.
- **Webform Name** – This will automatically populate with the Digital **DST ID**.
- **Other Documents** – Click **Add** to upload **all evidence to support your referral**. The document names will appear underneath the Add button along with the delete, allowing you to delete a document if added in error. You can add up to 10 documents.

Other Documents:

Add

Other Documents:

Add

Care Plan Test.docx	18.8 KB	
Test.docx	18.7 KB	

- **Comments** – This is your opportunity to add any additional comments about your Digital DST.
- Click **Submit** to send your Digital DST to the CCG/HB.

Your Digital Referral will be added to the **Referrals Screen**, and you will get the following message:

“Referral submitted successfully to <Name> CCG”

The screenshot shows the 'Referrals' tab selected in the top navigation bar. Below the navigation bar, there is a light blue box with a red border containing the message: 'Referral submitted successfully to Demonstration CCG.'

To view your referral, click on the referral from the Referrals tab on the Dashboard. You will be taken to the **View Referral** screen.

The screenshot shows the 'Referrals' tab highlighted in the top navigation bar. Below the navigation bar, there is a light blue box with a red border containing the message: 'Referral submitted successfully to Demonstration CCG.'

The View Referral screen is non-editable and is for information only.

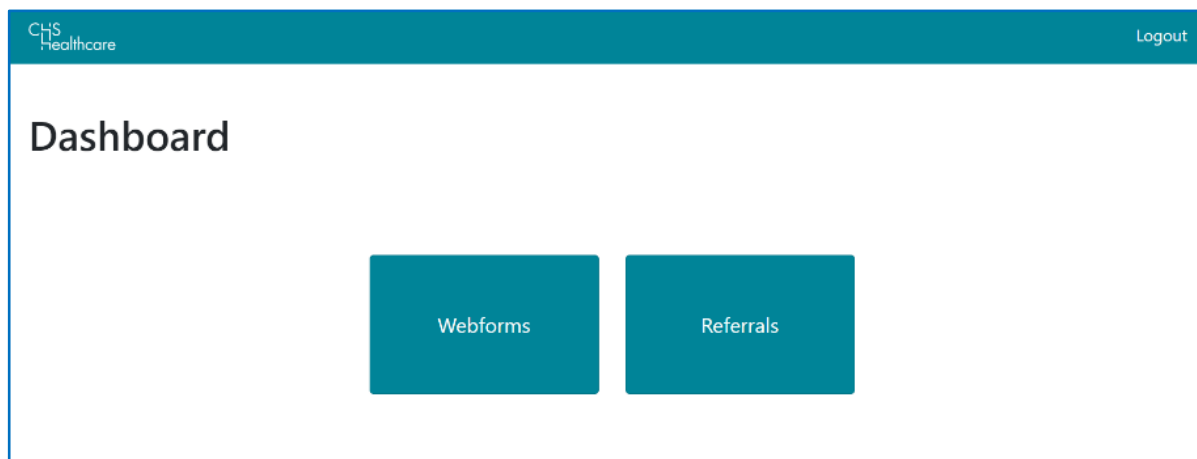
The screenshot shows the 'View Referral #68203' screen. It is divided into two main sections: 'Patient Details' and 'Referral Details'.
Patient Details:
 CCG/HB: East Downs ICB
 NHS Number: 444-444-4444
 Date Of Birth: 08/06/1968
 Additional Patient Details:
 Ethnic Origin: White British
 Title: Mr.
 Forename: Walter
 Surname: Scott
 Address: 1 Walter
 Town: Scott
 Postcode: AA0 0AA
Referral Details:
 Referral Type: DST
 Webform Name: Dst ID43308
 Comments: (Empty text area)
 Documents Submitted:
 • Test.docx
 • Dst ID43308.pdf

Please note all PDF documents that have been digitally generated within the portal will include relevant Patient Information within the header of each page.

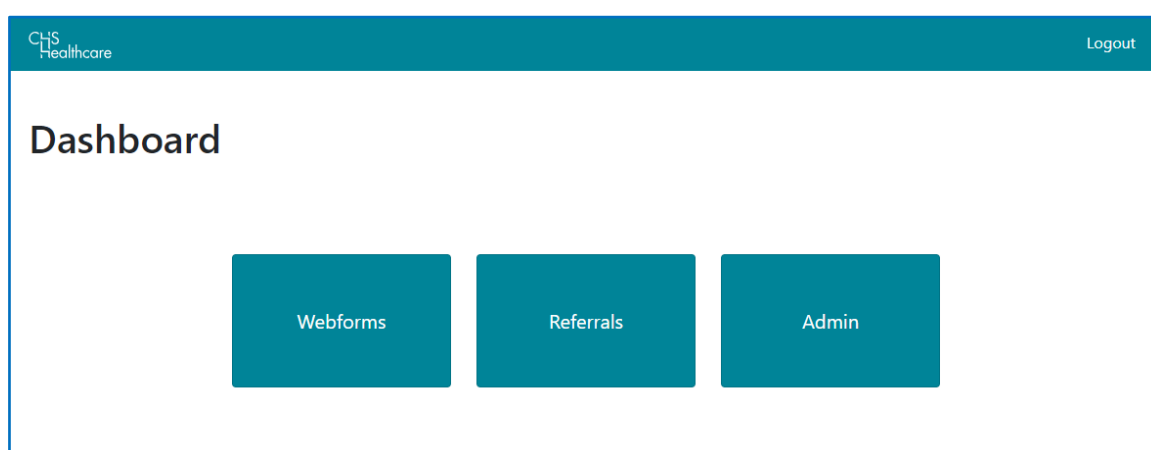
This information is automatically generated based on the data entered into the webform used to produce the PDF document. The Personal Details section of the Webform must be completed and the Webform must be saved before the header information will be populated.

10 Completing a Non-Digital Referral

Once you have logged in, you will be presented with the **Dashboard**, this is where you will see two tiles; Webforms (to create a digital referral), and Referrals (to upload a manual referral, and view the referrals you have In Progress, Completed, and Submitted).

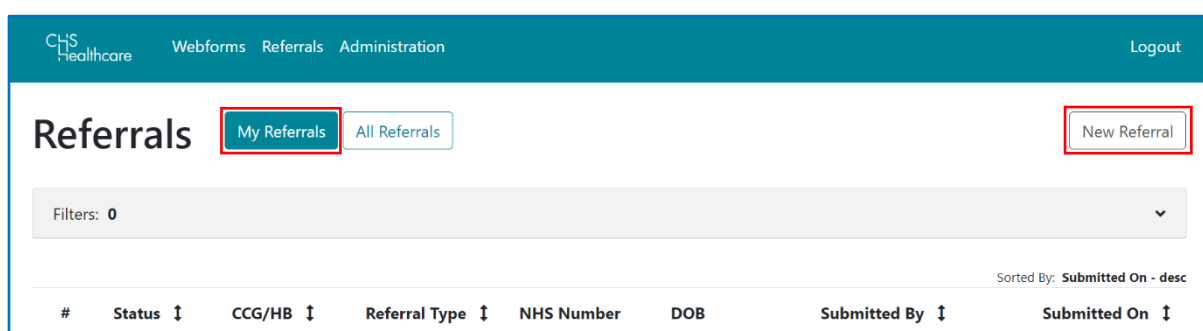


Please note if you are an Administrator you will have access to a further Admin tile. This will allow you to Create, and Amend another users profile.



From the Dashboard, select the Referrals tile. This will automatically take you to **My Referrals** which provides an overview of any Referrals you have created (both digitally as a Webform or as a standard Referral).

To create a new standard /non-digital Referral, click the **New Referral** tab.



When creating a referral, there are two sections that need to be completed:

10.1 Patient Details.

The fields that are mandatory are highlighted with an Asterisk (*).

- Enter the CCG/ Health Board you are submitting the Referral to
- Enter the Patients NHS Number
- Enter the Patients DOB

10.2 Referral Details.

- Referral Type
 - CHC
 - Fast Track
 - D2A
 - DST
- Click **Choose File** to upload the Consent document (if applicable)
- Click **Choose File** to Upload the Referral document
- Click **Add** to upload any **Other Documents** to support the Referral. The document names will appear underneath the 'Add' button, along with the ability to delete, if added in error. You can add up to 10 documents.

CHC example:

11 Monitoring Submitted Referrals

Once a Referral/Webform has been submitted it will appear in **My Referrals** section.

Referrals

My Referrals

All Referrals

New Referral

Filters: 0

Sorted By: Submitted On - desc

#	Status	CCG/HB	Referral Type	NHS Number	DOB	Submitted By	Submitted On
3078	Submitted	Demonstration CCG	DST	111-111-1111	20-04-1943	will.haydock@chshealthcare.co.uk	16-12-2020 15:23
3015	Submitted	Demonstration CCG	DST	888-888-8888	20-04-1940	will.haydock@chshealthcare.co.uk	10-12-2020 14:43
3014	Submitted	Demonstration CCG	CHC	333-333-3333	20-04-1945	will.haydock@chshealthcare.co.uk	10-12-2020 14:34

You can use the filters to search for specific Referrals/Webforms.

- Status
- CCG/HB
- Referral Type
- Submitted By
- Submitted On
- Ref ID

Enter your chosen search parameter and click on **Apply** to filter your results.

The user can see the status of a referral in the **Status** field.

The statuses are as follows:

- **All**
- **Submitted** - The Referral has been submitted to the selected CCG/HB and is awaiting to be viewed
- **Received** - The Referral has been acknowledged as being received by the selected CCG/HB and will follow business as usual and continue with the referral pathway.
- **Rejected** - The Referral has been rejected by the selected CCG/HB
- **Submission Failed** – The referral failed to be submitted to your chosen CCG/HB

Filters: 0

Status:

CCG/HB:

Referral Type:

Submitted By:

Submitted On:

All

All

All

All

Ref ID:

Apply

Reset

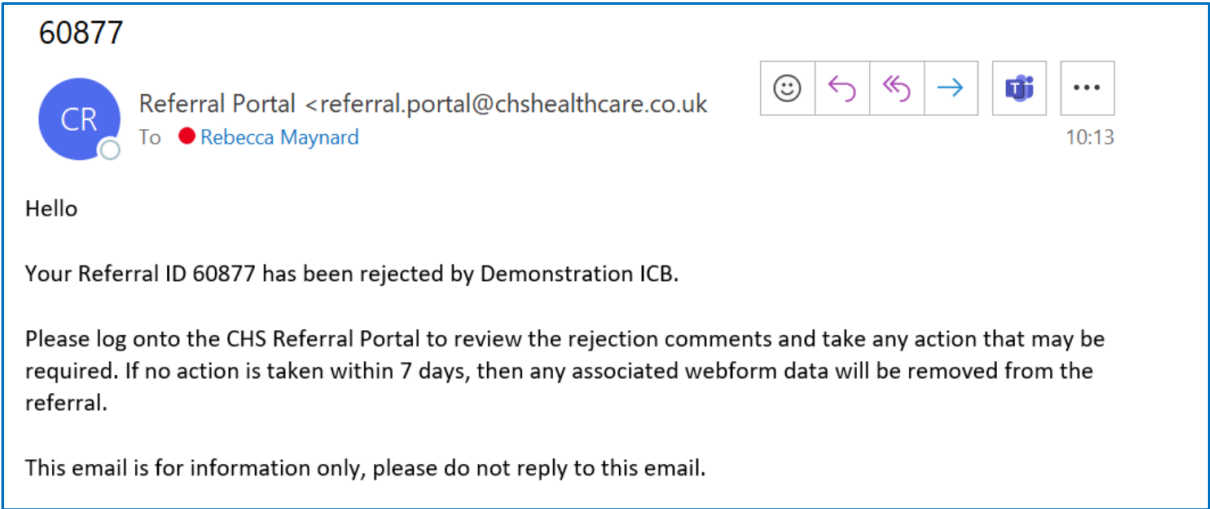
12 Rejected Referrals

12.1 Digital Referral/Webforms

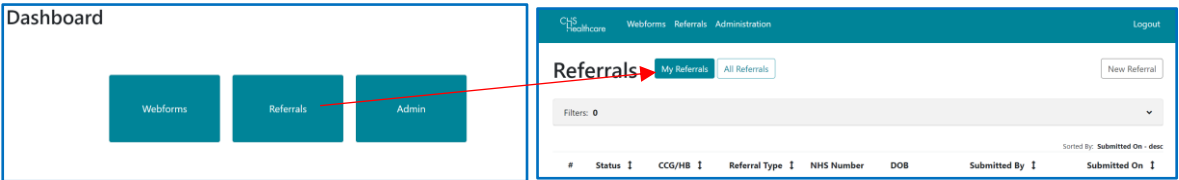
You have 7 Days to correct/amend any rejected Fast Tracks, and Checklists that you have submitted.

You have 21 Days to correct/amend any rejected DSTs (Blank DST, Annotated DST, or DST using Checklist data) that you have submitted.

When your Webform is rejected, you will receive an email, similar to the below example.



You can log back into the Referral Portal and locate the specific Webform from your **My Referrals** tab under the Referrals Tile.



Here you can view why your Webform has been rejected by clicking on the specific Webform and reviewing the Rejected Comments at the top of the screen.

Edit referral #68203 Back

Rejected Comments

15/01/2024 16:45 : Need further information, please supply supporting information

Patient Details:

CCG/HB: * NHS Number: * Date Of Birth: *

Additional Patient Details

Ethnic Origin: * Title: * Forename: * Surname: *

Address: * Town: * Postcode: *

Referral Details

Referral Type: *

Consent: * No file chosen Webform Name: Other Documents: No file chosen

Comments:

You can edit the Webform by clicking in the Referral ID Link in the Edit Referral Screen.

This will open the Webform in a new window where you can make the relevant changes, add an additional comment in the **Comments** section and re-submit the Webform to the CCG/HB. The Webform will retain the original Referral ID.

Edit referral #68203 Back

Rejected Comments

15/01/2024 16:45 : Need further information, please supply supporting information

Patient Details:

CCG/HB: NHS Number: Date Of Birth:

Additional Patient Details

Ethnic Origin: Title: Forename: Surname:

Address: Town: Postcode:

Referral Details

Referral Type:

Consent: No file chosen Webform Name: Other Documents: No file chosen

Comments:

DST - Walter Scott

CCG/HB: Export to PDF Submit

Date Of Birth: 08/06/1968

Personal Details

Representative ☒ Breathing ☐ Nutrition ☐ Continence ☐ Skin ☐ Mobility ☐ Communication ☐ Psychological ☐ Cognition ☐ Behaviour ☐

Was this DST completed whilst the individual was in an acute hospital?
☐ Yes ☒ No

Date of completion of Decision Support Tool:

Title: First Name: Last Name: NHS Number:

Telephone Number: GP Practice: Gender: Date Of Birth:

Permanent Address: Town: Post Code:

Current Location (if different from permanent address): Current Town: Current Post Code:

12.2 Non – Digital Rejected Referrals

Non-Digital Referrals cannot be resubmitted. Depending on the reason for the rejection, you may need to complete a new CHC Checklist/Fast Track/DST or attach new, or additional information before submitting to the CCG/HB again.

You can view the rejected Referral by clicking on it and reviewing the rejected Comments at the top of the screen.

Edit referral #68283Back

Rejected Comments
15/01/2024 16:54 : Please supply further information. Consent not signed

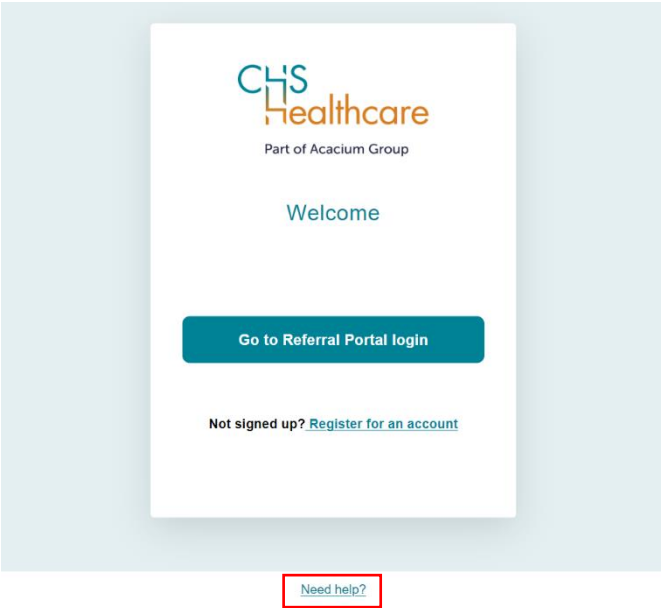
Patient Details:
CCG/HB: *
East Downs ICB
NHS Number: *
943-576-4428
Date Of Birth: *
15/01/1978
Additional Patient Details
Ethnic Origin: *
White British
Title: *
Mrs.
Forename: *
Theodora
Surname: *
Scott
Address: *
1 Walter
Town: *
Scott
Postcode: *
AA0 0AA

Referral Details
Referral Type: *
DST
Consent: *
Choose File No file chosen
Decision Support Tool: *
Choose File No file chosen
Other Documents:
Choose Files No file chosen
Comments:

Submit

13 Help

For further assistance if you are struggling to set up MFA or you are unable to log into the Referral Portal please contact your ICB/HB by clicking 'Need help?', where you will also find guidance information.

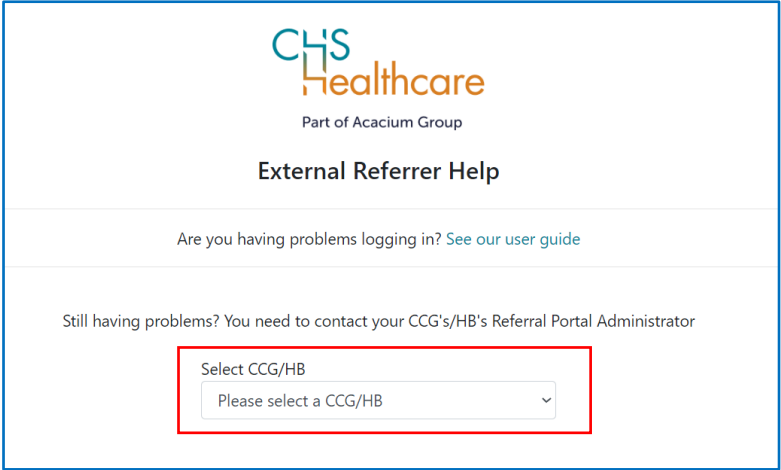


You will be presented with two options:

- 1. Are you an external user submitting referrals to a CCG/HB?
- 2. Are you a CCG/Administrator?



- 1. External referrer – You will be presented with the below page, you can obtain the contact details for your chosen CCG/HB you refer into by selecting from the dropdown.



2. CCG/HB Admin Help – You will be presented with the below page where you can obtain the contact details for our support team. You can contact by phone or by raising a support ticket.

Please note, if you are an external referrer, please do not contact the support team, please contact the CCG/HB you refer into.



14 Referral Portal/DRAR Frequently Asked Questions (FAQ)

14.1 I am trying to login but it is saying I do not have access?

If you have not logged into the Referral Portal/DRAR in the last 120 days you may receive a login failed message because you have been deactivated. Please contact the ICB/HB you wish to refer into and they will be able to check your profile. Please click on the 'Need Help' link from the login page for their contact details.

14.2 Can I submit referrals to different ICBs/HBs?

Yes, you can if you have access to submit referrals to the ICB/HB, however you CANNOT submit one referral to multiple ICBs.

14.3 The ICB/HB I want to submit to is not on my list – what should I do?

If you are an Administrator you can change a user's profile to include additional ICB's/HB's. However if you are a referrer from outside of the ICB/HB then please contact the ICB/HB you wish to refer into and they will be able to amend your profile. Please click on the 'Need Help' link from the login page for their contact details.

14.4 I have submitted a Referral to the wrong ICB/HB, what should I do?

Contact the ICB/HB and ask them to reject the referral so you can submit it to the correct ICB.

14.5 How will I know that my referral has been viewed/accepted by the ICB/HB?

You can check the status of a referral by logging into the Referral Portal and viewing the Status column.

Referrals New Referral

Referral submitted successfully to East Downs CCG.

Filters: 0

Sorted By: Submitted On - desc

#	Status	CCG	Referral Type	NHS Number	DOB	Submitted By	Submitted On
252	Submitted to CCG	East Downs CCG	CHC	111-111-1111	21-07-2019	nicola.trow@chshealthcare.co.uk	22-07-2019 02:40

14.6 If my referral has been rejected, will I know the reason why?

Yes, within the filters section you can filter on Rejected by status to see all referrals that have been rejected, click into the referral and the reason will be shown at the top of the page. Once the reason for rejection has been rectified you will need to submit a new referral.

You will also be notified via email if a referral has been rejected

View Referral #283 Back

Rejected Comments

Rejected Comments:

Duplicate test test

Patient Details

CCG: Demonstration CCG NHS Number: 181-750-3405 Date Of Birth: 04/04/1940

Additional Patient Details

Ethnic Origin: Gypsy Title: Prof Forename: Gary Surname: Green

Address: 1 Lower Green Street Town: Sutton Postcode: B72 1RT

Referrals New Referral

Filters: 0

Status: All Submitted to CCG Received by CCG Rejected by CCG

CCG: All Referral Type: All Submitted By: All Submitted On: dd/mm/yyyy

Apply Reset

Sorted By: Submitted On - desc

#	Status	CCG	Referral Type	NHS Number	DOB	Submitted By	Submitted On
283	Rejected by CCG	Demonstration CCG	CHC	181-750-3405	04-04-1940	civella.fodgett@chshealthcare.co.uk	22-07-2019 05:33
276	Rejected by CCG	Demonstration CCG	CHC	111-111-1111	08-01-1967	arun.jadhav@hshealth.com	20-07-2019 06:48
227	Rejected by CCG	Demonstration CCG	Fast Track	111-111-1111	01-07-2019	arun.jadhav@hshealth.com	20-07-2019 06:16
236	Rejected by CCG	Demonstration CCG	CHC	111-111-1111	01-07-1990	arun.jadhav@hshealth.com	22-07-2019 10:58
220	Rejected by CCG	Demonstration CCG	CHC	111-111-1111	07-01-1967	arun.jadhav@hshealth.com	19-07-2019 01:58
221	Rejected by CCG	Demonstration CCG	Fast Track	111-111-1111	08-01-1967	arun.jadhav@hshealth.com	19-07-2019 01:51
111	Rejected by CCG	East Downs CCG	CHC	207-574-5903	29-03-1952	nicole.jackson@broadcare.co.uk	16-07-2019 11:34

14.7 Can the digital referral be saved as a PDF and shared with other individuals or information contained in the PDF be copied and used in other documents?

Yes, you can download the digital referral both during and after you have completed all the fields, before you submit to the ICB/HB. This will be downloaded as a PDF and will look like a standard

template with the information automatically populated in the correct sections. The PDF can then be shared as required.

The information added to the digital referral can be copied from the downloaded PDF.

15 Multi-Factor Authentication (MFA) Frequently Asked Questions (FAQ)

15.1 What is Multi-Factor Authentication (MFA)?

Currently, to log in to Referral Portal (DRAR) you use your username and password. MFA is an additional way of checking that it is really you when you log in to your account. In addition to your username and password, you will need to set up another form of authentication such as using an authentication app on your smartphone or tablet. This second layer of security is designed to prevent anyone but you from accessing your account, even if they know your password.

15.2 What are the benefits of MFA?

- Keeps any patient data in a more protected environment
- Helps you gain access to your account should you forget your password
- Helps protect the reputation of the NHS
- Provides increased protection against cyber-attacks
- Checks if an attempt is made to access your account from an unusual location or device

15.3 Why is MFA being enforced?

The NHS objective is to promote and ensure widespread use of MFA as a fundamental cyber security control, to manage the data security risks associated with user credential compromise.

With the risk of security breaches and attacks on accounts, it is important to step up security to protect our clients and their patients from cyber-attacks. Implementing MFA is one of the easiest, most effective actions you can take to improve the security of your data. It is no longer a 'nice to have' feature, but a necessity.

15.4 What are the options for MFA?

When setting up MFA for the first time, there will be two available options:

Authenticator app: Download an Authenticator App for instance Microsoft Authenticator app to your smartphone or tablet to verify your sign in or get a verification code.

[Find out how to download the Authenticator app for your device](#)

Security Key: For instance FIDO (Fast Identity Online), a security key is a physical key/token and is a secure, hardware-based authentication method. For instance, it can be used in the USB drive of your laptop or computer.

Please note: There is a cost for the security key, please contact your ICB/HB Administrator through the help function on the Referral Portal (DRAR) login page and they will be able to assist you further.

[Read more about FIDO2 on the NHSmail website](#)

After you have set up MFA and selected one of the above options but then need to change your MFA method, you will need to raise this with you ICB/HB Administrator. **This is because your MFA access will need to be reset so you can change settings when you set up MFA again.**

15.5 What applications/systems will MFA protect?

MFA has already been set up to protect our Patient Management Systems that your ICB/HB use, and will now be implemented on the Referral Portal (DRAR).

15.6 I am getting authentication requests, but I am not trying to sign in. What should I do?

If you are not trying to sign in but you are receiving requests to approve a sign-in request or provide an authentication code, this indicates a malicious person is trying to access and compromise your account.

Only approve authentication requests when you know you are the one who made them. If you receive authentication requests that you have not made, do not approve them or select anything in the request. Alert your ICB/HB who will assist you in protecting your account.

15.7 I have a new mobile phone but kept the same number. Do I need to do anything?

If you have selected the Authenticator app as your preferred authentication option, you will need to download the app on your new mobile phone. Then back up the details from your old mobile phone to your new one.

Please note: Before you follow the steps below to set up the Microsoft Authenticator app on your new device, please contact your ICB/HB Administrator through the help function on the Referral Portal (DRAR) login page and they will be able to assist you further. **This is because your MFA access will need to be reset so you can set up MFA again.**

1. Open the Microsoft Authenticator app on your old mobile phone
2. Tap on the three-dotted icon and go to 'Settings'
3. Toggle on the 'Cloud backup' or 'iCloud backup' option
4. Add a recovery account
5. Open the Microsoft Authenticator app on your new mobile phone
6. Tap on the 'Begin recovery' button
7. Enter the credentials of the recovery account
8. Reverify new accounts to start using them

15.8 What should I do if my mobile phone is lost or stolen?

Inform your local IT team and remember to always register an alternative method of MFA for emergencies. You can do this with the Microsoft Authenticator app on another mobile device, or with a Security Key for instance FIDO. [Read more about FIDO on the NHSmail website.](#)

If you change your method of authentication i.e., from the Authenticator app to a Security Key you will need to contact your ICB/HB Administrator. **This is because your MFA access will need to be reset so you can change settings when you set up MFA again.**

Please note: There is a cost for the security key, please contact your ICB/HB Administrator through the help function on the Referral Portal (DRAR) login page and they will be able to assist you further.

If you change your method of authentication i.e., from the Authenticator app to a Security Key you will need to contact your ICB/HB Administrator. **This is because your MFA access will need to be reset so you can change settings when you set up MFA again.**

To set up the Microsoft Authenticator app on your new phone, please follow the steps below:

1. Open the Microsoft Authenticator app on your old mobile phone
2. Tap on the three-dotted icon and go to 'Settings'
3. Toggle on the 'Cloud backup' or 'iCloud backup' option
4. Add a recovery account
5. Open the Microsoft Authenticator app on your new mobile phone
6. Tap on the 'Begin recovery' button
7. Enter the credentials of the recovery account
8. Reverify both accounts to start using them

15.9 What if I do not want to use my personal mobile phone for MFA?

If you do not have a work mobile but want to use the Microsoft Authenticator app as your preferred MFA option, we recommend you use your personal mobile. This is because it is unique to you. This helps ensure your account can only be accessed by you. Even if someone has your login details and password, they will not be able to log in to Referral Portal (DRAR) without your personal mobile.

Alternatively, you could be provided with a Security Key.

[Read more about FIDO on the NHSmail website.](#)

Please note: : There is a cost for the security key, please contact your ICB/HB Administrator through the help function on the Referral Portal (DRAR) login page and they will be able to assist you further. When you set up MFA for the first time, you will need to select one of the two options above.

15.10 Can MFA allow data access to my personal mobile phone?

The Microsoft Authenticator app does not collect or store any personally identifiable data. Keeping your Referral Portal (DRAR) account secure will protect the organisation, your own personal data, and patient data. Your personal mobile phone details are not used for any other purpose than protecting your account. By adding the Microsoft Authenticator app to your personal mobile phone, you will just be providing a method to confirm who you are.

15.11 Does my mobile device need to be connected to the internet for MFA?

If you are using the Microsoft Authenticator app as your authentication option, the push notification you receive on your phone to approve a sign-in requires an internet connection.

If you are not using your mobile device and you are using a Security Key as your authentication option instead, then an internet connection is required.

Please note: There is a cost for the security key, please contact your ICB/HB Administrator through the help function on the Referral Portal (DRAR) login page and they will be able to assist you further.

15.12 If I do not have a smartphone or enough space to download the Microsoft Authenticator app, can I still register for MFA?

The Microsoft Authenticator app is the preferred method for MFA and will give you the best experience. The app is available for Android and iOS. If your phone is unable to run the app, you can select an alternative authentication method known as a Security Key.

[Read more about FIDO on the NHSmail website.](#)

Please note: There is a cost for the security key, please contact your ICB/HB Administrator through the help function on the Referral Portal (DRAR) login page and they will be able to assist you further.

15.13 Can I delete the Microsoft Authenticator app from my mobile device?

Make sure you have an alternative method to authenticate before doing so i.e., a Security Key, as you will need to authenticate to log in to Referral Portal (DRAR).

[Read more about FIDO on the NHSmail website.](#)

Please note: There is a cost for the security key, please contact your ICB/HB Administrator through the help function on the Referral Portal (DRAR) login page and they will be able to assist you further.

15.14 Do I need to authenticate each time I log in to Referral Portal (DRAR)?

Referral Portal (DRAR) and MFA will be using a Single Sign-On (SSO) process. This means if you have logged in to Referral Portal (DRAR) and completed MFA, you will then be authenticated for 12 hours. During this time period, you can log back in to Referral Portal (DRAR) without needing to re-enter your login credentials or use MFA again.

Please note: If you log out of all platforms within Referral Portal (DRAR) or your session has expired (over 12 hours), you will need to re-enter your login credentials and use MFA.

15.15 What should I do if I have an issue with my Security Key?

If you are having issues with your Security Key, please contact your ICB/HB Administrator through the help function on the Referral Portal (DRAR) login page and they will be able to assist you further to ensure it is working as expected.

15.16 My 6-digit code in the Authenticator app is being rejected for sign in (often with the message Incorrect Code)?

If you receive an invalid code whilst using the authenticator app, this is due to the code resetting every 30 seconds, there is a countdown timer next to the code, please enter the next available code that appears.

15.17 My 6-digit code in the Authenticator app is being rejected for sign in (often with the message Incorrect Code)?

First check you are selecting the right application from the list in your authenticator app. If you verified that you are selecting the correct application, make sure that your mobile device's clock settings are correct. One-time passwords are generated using Coordinated Universal Time (UTC), so their device's time must be correct for their code to work.

How to check clock settings:

Android Devices

- Go to Settings > Date & Time.
- Make sure that the box next to Automatic is checked.
- To turn it off, go to Settings > Date & Time.
- Tap the box next to Automatic to un-check it.

iOS Devices

- Go to Settings > General > Date & Time.
- Enable Set Automatically.
- If this setting was already enabled, disable it for a moment, then re-enable.

15.18 I am being logged out after 30 seconds following successful authentication?

If you have successfully authenticated, but you get logged out after 30 seconds, then third-party cookies within your internet browser will need to be enabled.

Enabling third-party cookies can vary depending on the browser you are using. This will guide you through the process for Google Chrome and Internet Explorer:

Google Chrome:

- Open Google Chrome.
- Click on the three dots in the top-right corner and select Settings.
- Scroll down and click on Advanced.
- Under Privacy and security, click on Site settings.
- Select Cookies and site data.
- Toggle off the switch for Block third-party cookies.

Internet Explorer:

- In the menu bar, select Tools > Internet options > Privacy > Advanced.
- Under First-party Cookies, select Accept or Prompt.
- Under Third-party Cookies, select Accept or Prompt2.

15.19 How do I scan the QR code to set up MFA on my Authenticator App?

When initially setting up using the Authenticator App, you will need to ensure you scan the QR code within the Authenticator App and not through your camera, otherwise the setup will not work.

If you have scanned the QR code by using your camera, MFA will need resetting so you can start the initial set up again. Please contact your contact your ICB/HB Administrator through the help function on the Referral Portal (DRAR) login page and they will be able to assist you further.