

Growth & Nutrition Advisory Service

Referral training
NHSGG&C

Referral to GNAS team

- Accept **non urgent** requests for assistance via Emis Web inbound referrals for:
 - Cases of suspected weight faltering
 - Overweight/obesity
 - Suspected non IgE cow's milk allergy
 - Faddy eating

- Please follow Infant Feeding Guidelines for breast fed infants under 6 months.

- The Growth and Nutrition Advisory Service will support the health visitor/ family nurse to manage problems in the community for the nutritional issues.

Referral to GNAS team

Submit a completed referral on Emisweb detailing the specific concern.

➤ Making a referral guidance

http://www.staffnet.ggc.scot.nhs.uk/Applications/EMISWeb/Documents/Community%20Childrens%20Services%20referral%20process%20%20EMI%20S%20guidance%20%20v22_09_2.pdf



COMMUNITY CHILDRENS SERVICES REFERRAL PROCESS - EMIS GUIDANCE

1. ADDING A NEW REFERRAL

This guidance document covers the process for referring children to services within Emis Web. The services using Emis Web are Child and Adolescent Mental Health, Speech & Language Therapy, Children & Families, Specialist Community Paediatrics and SPHERE Continence Service.

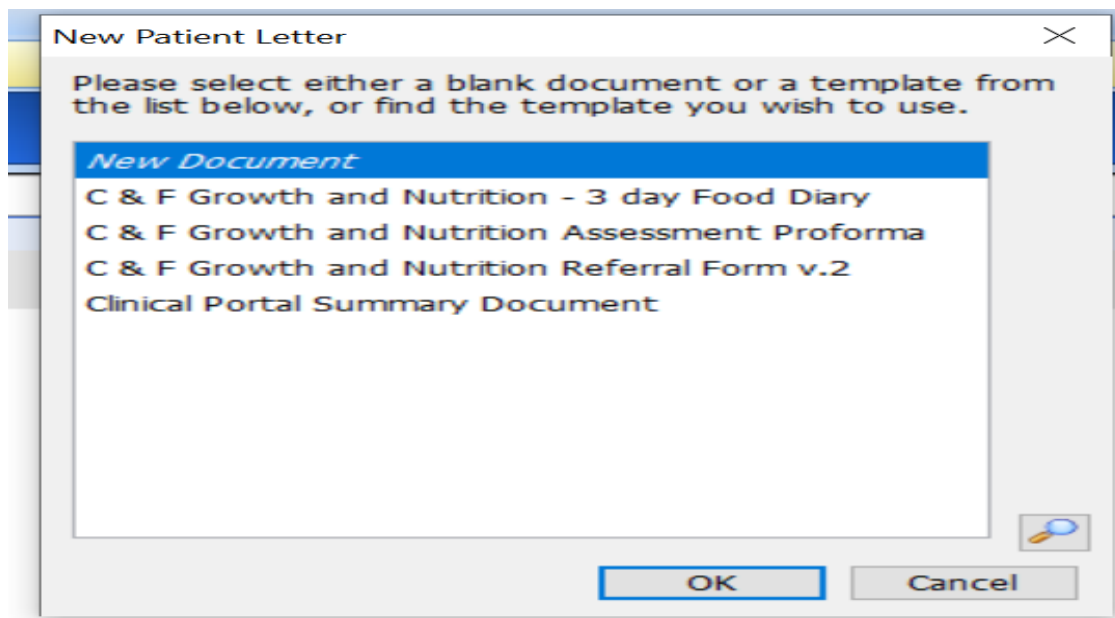
There are 3 basic steps

1. Create a referral letter/template/Consultation & save to the patient's Care Record
2. Create an Inbound Referral for the relevant team in Patient Administration
3. Send a task to the relevant Admin team advising that a new inbound referral has been created for their team

Follow the steps below, along with the Service Specific information that follows:

Step 1 - Create a referral letter & save to the patient's Care Record

➤ Add document → create letter → C & F Growth and nutrition referral form



GROWTH & NUTRITION TEAM

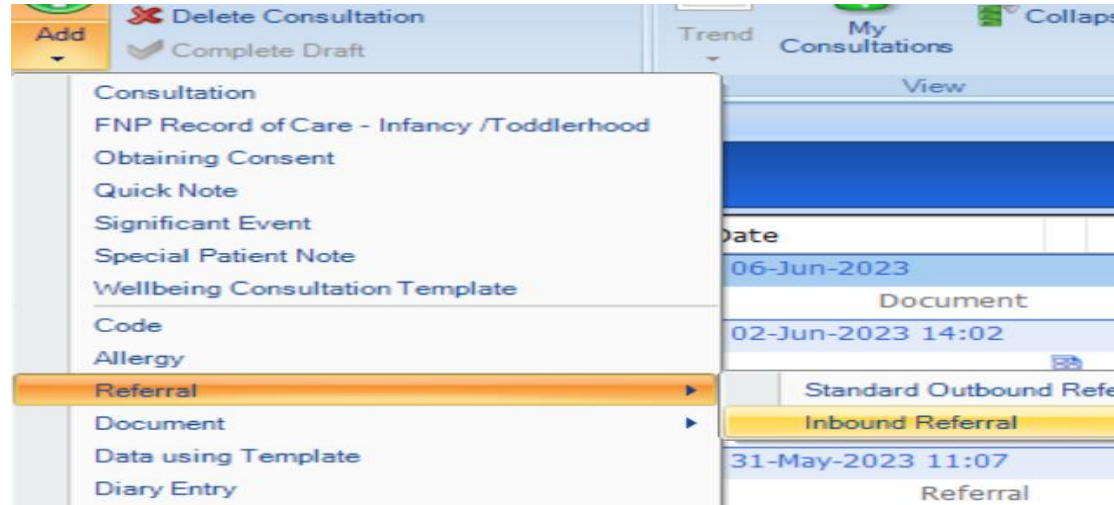


| REFERRAL FORM | | | |
|--|-------------------|-------------------|--------------------------|
| For use in pathways of care for weight faltering and childhood obesity | | | |
| Child's Name | Miss Minnie Mouse | Date of Birth/CHI | 150 123 1234 15-Jan-2023 |
| We will need the following details in order to decide what input is necessary: | | | |
| 1. What concerns do you have? | | | |
| <input type="text"/> | | | |

➤ Complete referral form → file → save and close

Step 2 - Create Inbound Referral

➤ Add ➔ Referral ➔ Inbound referral



➤ Referral source ➔ Search for the name of the referrer (e.g. a Health Visitor)

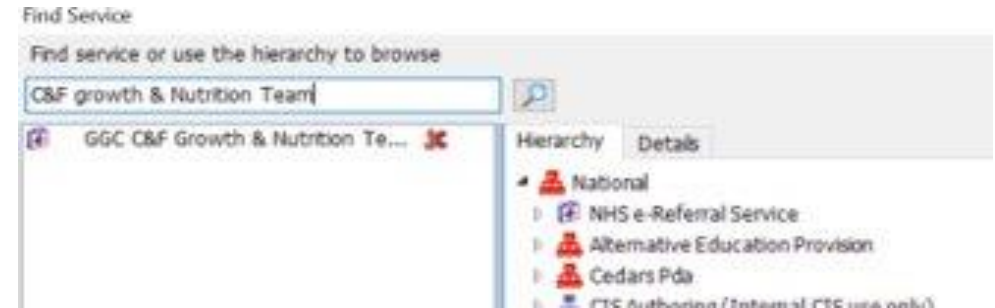
A screenshot of the 'Inbound Referral' form. The form has a sidebar on the left with three tabs: 'Source & Target' (selected), 'Referral Details', and 'Appointment Pref'. The main content area is divided into two sections. The first section is 'Referral Source & Target' and contains a checkbox 'Is this a Self Referral?' and two dropdown menus: '* Referral Source' and '* Referral Target'. Each dropdown menu has a search icon to its right. The second section is 'Patient Administration' and contains a checkbox 'Add this Referral to your Patient Administration List' and a dropdown menu '* Assigned Service'.

Step 2 - Create Inbound Referral

➤ Referral target – select C&F Growth & Nutrition Team

➤ The Referral target will be copied into the Selected Service – do not change this

➤ Ensure that Add this referral to your patient admin list box remains checked. Click Next



Referral Source & Target

Is this a Self Referral?

* Referral Source

* Referral Target

Patient Administration

Add this Referral to your Patient Administration List

* Assigned Service

Step 2 - Create Inbound Referral

- Clinical term – Refer no direct consultation (8HI)

Referral Details

* Clinical Term

* Referral Date 07-Jun-2023

Code Selector

no direct consultation

A Refer - no direct consultation

Code hierarchy

- ▲ Clinical Terms (Read Codes v2). Rele
- ▲ Other therapeutic procedures
- ▲ Referral for further care

Refer - no direct consultation

- Purpose – Management Advice

* Clinical Term Refer - no direct consultation

* Referral Date 07-Jun-2023

* Urgency Routine

* Referral Mode Written

* Purpose

Reason for Referral

- Unknown
- Investigation
- Management Advice
- Patient Reassurance
- Performance of a procedure / operation
- Treatment
- Assessment
- Assessment & Education
- Self Referral

UCPN

* Patient Category

Step 2 - Create Inbound Referral

- Reason for referral – Type the number representing the referral reason below.
- Do not enter any other text.
 - For Weight Faltering type “1”
 - For Obesity type “2”
 - For Cow’s Milk Allergy type “3”
 - For General Inquiry type “4”
- Click Next
- Click OK (you do not need to complete the appointment preferences screen)

* Purpose

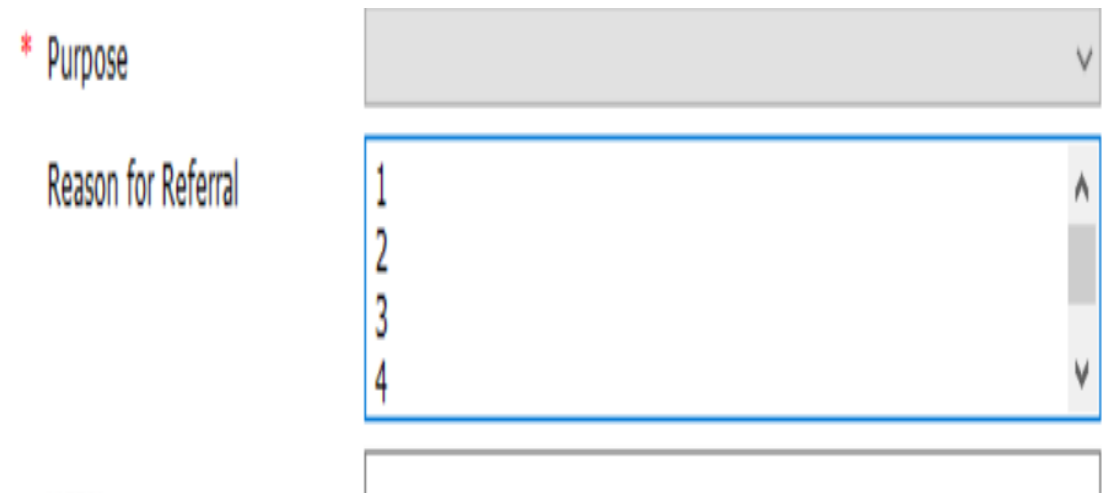
Reason for Referral

1

2

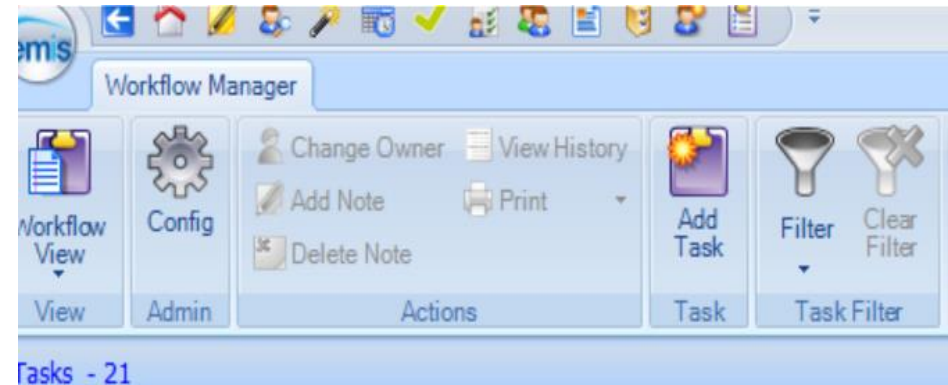
3

4



Step 3 - Send a task to the C&F Growth & Nutrition Team

- Access Workflow → Click Add Task



Complete the Add Task Window as follows:

- Task Type – Patient Note – this ensures all the patients details are in the task
- Patient – if you have a patient active in your patient précis bar, it will be copied into the patient field. If this is not the correct patient, or you do not have a patient active, click the Spy Glass and search / select the correct patient

User Task Details

?

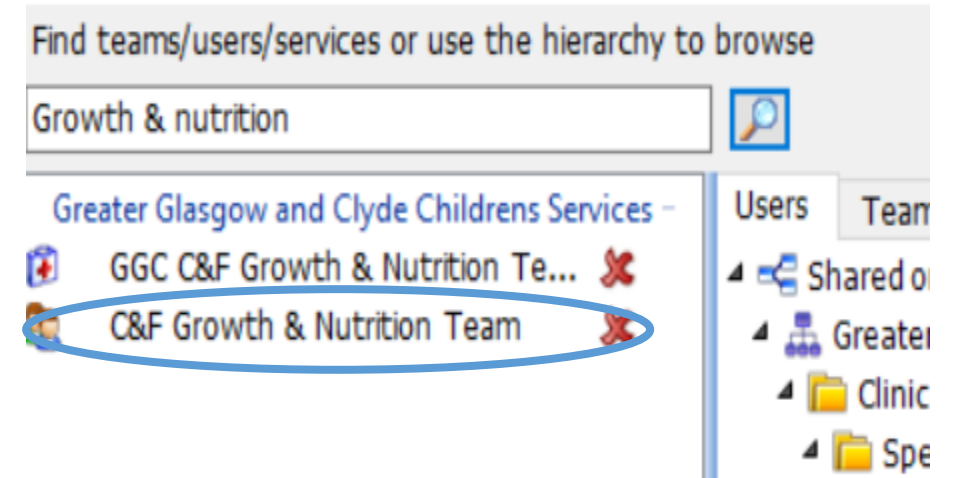
Add new task details below

| | |
|-----------|--|
| Task Type | Patient Note |
| Patient | MOUSE, Minnie (Miss) |
| Due Date | 07-Jun-2023 |
| To | C&F Growth & Nutrition Team |
| | <input type="checkbox"/> All recipients to action task |
| Notes | |

Step 3 - Send a task to the C&F Growth & Nutrition Team

- Find team - click the Spy Glass and search for the relevant team e.g. Growth & Nutrition Team
- Notes – advise the G&N team that a referral letter form has been saved on the child’s care record and an inbound referral has been created.
- Click Send

Search cross organisations



Referral to GNAS



- Attach completed preschool growth and nutrition 3 day food diary from Emisweb resources

<http://www.staffnet.ggc.scot.nhs.uk/Clinical%20Info/MINF/Documents/3-Day%20Food%20Diary.pdf>

| Day 3 | | |
|--------------------|----------------|--------|
| Time of meal/snack | FOOD AND DRINK | AMOUNT |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Growth & Nutrition Team

3-Day Food Diary

Please record **everything eaten and drunk for the next 3 days**

Try to:

- Describe the food in detail and how it was cooked, eg fried, grilled, boiled.
- Record rough amounts offered and how much was actually eaten.
- Include any snacks eaten between meals, ie sweets, biscuits, crisps etc.
- Record the amount of milk drunk over the day.
- Record any sugar added to cereals, puddings, drinks etc.
- Record the amount of margarine, butter, low fat spread used.

Growth & Nutrition Team - Please then task the team (C&F Growth & Nutrition Team) to ensure they have received the food diary.

Referral to GNAS



All documents are in Emis Web

- Add document
- Create letter
- Search new document
- Search C&F Growth and Nutrition
- Resources available: 3 day food diary and referral document

| Day 3 | | |
|--------------------|----------------|--------|
| Time of meal/snack | FOOD AND DRINK | AMOUNT |
| | | |
| | | |
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Growth & Nutrition Team

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Growth and Nutrition Advisory Service

Referral form



| | | | |
|--|--|-----|--|
| Child's Name | | DOB | |
| Gestation (weeks) | | CHI | |
| What concerns do you or the family have? | | | |
| | | | |
| What has been revealed by assessment so far and what input has been offered? | | | |