



**Professional
Record
Standards
Body**

**Better records
for better care**

DAPB4086 Wound Care Information Standard

(DAPB4086 Amd 60/2022)

Requirements Specification v1.0

10 November 2023

Data Alliance Partnership Board

The Data Alliance Partnership Board (DAPB), which holds delegated authority from the Secretary of State for Health and Social Care, has approved a new information standard for publication under [section 250 of the Health and Social Care Act 2012](#).

Assurance that this information standard meets the requirements of the Act and is appropriate for the use specified in the specification document has been provided by the Data Standards Assurance Service (DSAS) and endorsed by the Data Alliance Partnership Sub Board (DAPSB).

This information standard comprises the following documents:

- Information Standards Notice (ISN)
- Requirements Specification (this document)
- High Level Implementation Guidance

An Information Standards Notice (DAPB4086 Amd 60/2022) has been issued as a notification of use and implementation timescales. Please read this alongside the documents for the standard.

The controlled versions of these documents can be found on the [NHS England website](#). Any copies held outside of that area, in whatever format (e.g. paper, email attachment), are considered to have passed out of control and should be checked for currency and validity.

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Document Management

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| 0.1 | 17.05.2023 | First draft |
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| 0.3 | 20.06.2023 | Updates following DSAS review |
| 0.4 | 21.06.2023 | Updates after further review |
| 0.5 | 22.06.2023 | Updates after further review |
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Reviewers

| Reviewer name | Title / Responsibility | Date | Version |
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| Martin Orton | Senior Programme Manager, PRSB | 06.11.2023 | 0.7 |
| Sarah Furnell | Data Standards and Assurance Service (DSAS) – Publications, NHS England | 07.11.2023 | 1.0 |

Approved by

| Name | Title/Responsibility | Date | Version |
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| Mike Watson | NWCSP Lead | 25.05.2023 | 0.1 |
| | | | |

Glossary of Terms

| Term / Abbreviation | What it stands for |
|---------------------|--|
| DAPB | Data Alliance Partnership Board. |
| DAPB4086 | The Wound Care Information Standard |
| FHIR | Fast Healthcare Interoperability Resource. A method for exchanging healthcare information electronically. |
| ISN | Information Standards Notice. |
| NWCSP | National Wound Care Strategy Programme |
| PRSB | Professional Record Standards Body |
| Refset | In the context of this Standard, a Refset is a group of SNOMED clinical terms that is represented by a single reference, rather than a list of all the terms contained therein. |
| SNOMED CT | Structured clinical vocabulary for use in an electronic health record. SNOMED CT has been adopted as the standard clinical terminology for the NHS in England. |
| TRUD | Technology Reference Data Update Distribution. The standard references (eg) NHS Data Dictionary and SNOMED CT terminology. System suppliers are expected to update their products via TRUD or via the Terminology Server . |

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1 Introduction

The Professional Record Standards Body (PRSB) has been commissioned by the National Wound Care Strategy Programme (NWCSP) to produce a wound care record information standard that will support the programme's strategic aims to:

- Reduce patient suffering
- Improve healing rates
- Prevent wounds occurring and recurring
- Use clinical time and other health and care resources in the most effective way

Wound care is provided by a wide range of professionals working as a care team that can include doctors, nurses, podiatrists, and others, as well as people themselves and their carer(s). As such it is vital that information is shared so that care is optimised. However, there is currently no recognised standard for recording the details of the provision of wound care in a person's care record and documenting the assessments, observations and treatments that have been delivered in a way that can be shared between care professionals that provide wound care. The NWCSP has identified the creation of an information standard as a key enabler to improving wound care services for people. PRSB working with its member organisations, representing the health and care professions and people who use services, set out to develop a standard to support sharing information digitally to deliver safe and effective care.

The Wound Care Information Standard provides a framework for clinicians to record the clinical assessment, observations and treatments delivered, based on professional guidance and the relevant NICE guideline, evidence review, and extensive consultation with healthcare professionals, people, and carers.

It defines what items should be recorded for wound care: a very few are mandatory, some are required to be used where the information is available, and some are optional. Definitions of 'mandatory', 'required' and 'optional' in the context of this standard are given in section 4.1 of the High Level Implementation Guidance.

The Final Report of the development of the standard as well as other supporting documents to aid implementers are available on the [PRSB's webpage](#).

The Information Standard (DAPB4086 Amd 60/2022 has been approved for publication by the Department of Health and Social Care under [section 250 of the Health and Social Care Act 2012](#). It prepares providers and their systems to be able to begin sharing information in the future, which will be facilitated through a further release of this standard.

1.1 Purpose

The purpose of this document is to detail the requirements for providers and their system suppliers to implement DAPB4086 (this standard). This will prepare providers and their systems to be able to begin sharing information in the future via mechanisms currently under consideration by NHS England, for example using HL7 FHIR profiles. The requirement for sharing will be associated with an update to this standard.

The National Wound Care Strategy Programme (NWCSP) commissioned the PRSB to develop this information standard.

Through this application, the standard will be referred to hereafter as DAPB4086 (Wound Care Information Standard). Please see section 1.3 which describes the key documents required to implement DAPB4086.

1.2 Definitions

It is important to understand the key terms used to describe the data hierarchy of the information models for PRSB developed standards. Details are provided in the published Implementation Guidance document.

1.3 Supporting documents

Supporting documents for DAPB4086 include:

- DAPB4086 Wound Care Information Standards Notice (ISN)
- DAPB4086 Wound Care Information Standard Requirements Specification (this document)
- DAPB4086 Wound Care Information Standard – High Level Implementation Guidance
- PRSB Wound Care information model (v1.0)

DAPB4086 makes reference to the PRSB Wound Care Information model which is hosted and maintained on the PRSB’s webpage.

The following supporting documents are published for the standard.

| Document Name | Purpose |
|---|--|
| PRSB Wound Care standard information model v1.0 Wound Care Standard – PRSB (theprsb.org) | Provides the information model setting out the detailed content, format, and structure, needed for a provider to implement the standard. Provides the SNOMED CT codes and resets for the information models. Includes detailed implementation guidance at section and element level. It is available via the PRSB viewer or in JSON (machine readable) or Excel file formats. |
| PRSB Wound Care Clinical Safety Case Wound Care Standard – PRSB (theprsb.org) | Details the hazards identified for the standard along with mitigations for use by system suppliers and implementors of the standard in their own safety cases. |
| Other documents such as Final report or release notes for new releases Wound Care Standard – PRSB (theprsb.org) | The webpage includes the: Final report describing the methodology used, stakeholders engaged, findings, conclusions and recommendations. Examples for each wound type to make the standard easier to understand with life-like scenarios An implementation toolkit to support providers with implementation, focusing more on the aspects of |

| | |
|--|---|
| | getting stakeholders onboard more than the technical implementation. |
| DAPB4086 Wound Care Information standards notice (ISN) Amd 60/2022 | The Information Standards Notice provides confirmation of the standard details, implementation date, whether it is mandated or voluntary, the legal or contractual basis upon which the data are being requested and details of key contacts. |
| DAPB4086 Wound Care Information standard high level implementation guidance v1.0 | Provides high level guidance and context to providers involved in care planning on the implementation of DAPB4086 (this information standard). |

Please note that additional supporting documents may be added to the PRSB website over time as a result of feedback from implementation.

1.4 Scope

This information standard defines the fields (structure) needed for implementation of an effective wound care record through:

- The PRSB Wound Care standard information model v1.0

The obligations to providers and their suppliers to comply with these requirements when implementing DAPB4086 are presented through:

- The DAPB4086 Wound Care Information standard requirements specification v1.0, and
- The DAPB4086 Wound Care Information standard high level implementation guidance v1.0.

This release of DAPB4086 (this information standard) applies to the implementation of the PRSB Wound Care Information model (v1.0).

The scope of this information standard, with regards to providers and their respective levels of compliance is as follows:

- Wound care for the following wound types:
 - Pressure Ulcers
 - Lower limb (leg and foot) wounds
 - Surgical wound complications
- Wound care for all ages of people
- All in scope health and care settings and individuals are expected to be able to create, edit and view the person's Wound Care record.
- Compliance with DAPB4086 defined by being able to create, edit and view the person's Wound Care record, is as laid out below.

Exclusions from scope:

- Wound types not specified above, including those caused by external factors such as trauma and burns.
- The standard is not intended to support the management of the disease mechanism which are often the cause of chronic wounds (e.g., vascular disease, peripheral arterial disease), or the procedures that may have caused the wound (in the case of surgical wounds)

(NB – the terms “MUST”, “SHOULD” and “MAY” are defined in [section 2.1](#), below).

All service providers in the following health and care settings **MUST** conform to this information standard:

- Primary care services providing wound care
- Community services providing wound care
- Secondary care services providing wound care
- Mental health services providing wound care

All service providers in the following care settings **SHOULD** conform to the information standard:

- Social care services
- Ambulance services

This information standard will impact:

- All health and care IT systems suppliers providing systems to the providers detailed in the above scope.

The above scope is the result of guidance from clinical, technical and governance subject matter experts. The scope may widen to mandate other types of setting in future releases of this information standard.

Rules around information governance when using this standard will be determined locally (see Section 6 of the high level implementation guide).

1.5 Implementation plan

Compliance must be achieved no later than **September 2025** in line with the published Information Standards Notice.

The implementation plan is provided in the DAPB4086 Wound Care Information standard [high level implementation guidance](#).

1.6 Support and maintenance

Where additional advice in implementing DAPB4086 is required, the PRSB support service can be contacted [here](#) or via support@theprsb.org. The PRSB is responsible for managing

any updates to the information model and implementation guidance through established assurance processes and release cycles at the PRSB and DAPB. If possible, please include “Wound Care ISN” in the subject header of your message so that it can be identified appropriately.

Maintenance releases for PRSB developed standards are currently planned for 3-year cycles, however these may be updated on a more regular basis based on need and clinical and professional review. Issues raised may also affect the date for future releases.

The above email address can also be used should you have any suggested enhancements or amendments to any aspect of the DAPB4086 information standard.

1.7 Related standards

It is highly recommended that providers are aware of the [Personalised Care and Support Plan](#) standard as that is used as part of the wound care information standard, and the [Core Information Standard](#) which underpins shared care records. Please note that this information standard does not mandate compliance with the core information standard, which is yet to complete ISN publication. More details about the relevance of these standards are provided in the DAPB4086 high level implementation guidance document.

2 Requirements

This document defines the specification that health and care providers (termed the PROVIDER), need to work with their suppliers of IT systems (termed the SYSTEM) to implement the requirements of DAPB4086 Wound Care Information Standard Notice (STANDARD).

NB: the onus is on PROVIDERS to instruct their SYSTEM suppliers to comply with the STANDARD via their local contracts.

The requirements within this specification are assigned levels using the following terms:

MUST - This word, or the term "SHALL", mean that the definition is an absolute requirement of the specification.

SHOULD - This word, or the adjective "RECOMMENDED", mean that there may exist valid reasons in particular circumstances to ignore a particular item, but the full implications must be understood and carefully weighed before choosing a different course.

MAY - This word, or the adjective "OPTIONAL", mean that an item is optional. One provider may choose to include the item because their local processes require it or because they feel that it enhances the product, while another provider may omit the same item.

2.1 Provider requirements

| Reference | Requirement |
|-----------|---|
| P01 | Providers MUST read the Requirements Specification (this document) in conjunction with the DAPB Wound Care High Level Implementation Guidance, and the PRSB Wound Care Information model (version 1.0) including detailed implementation guidance. |
| P02 | Providers MUST review their system compatibility against this standard to identify any changes required to current practice and systems to ensure compliance with this standard. |
| P03 | Providers MUST ensure that their current system is updated, as required, to be conformant with this standard. |
| P04 | It MUST be possible to validate any mandatory items at the point of data entry to prevent a user from not completing an associated field. |
| P05 | Providers SHOULD provide adequate training for all staff involved in collection and recording of this data. |
| P06 | Where there are suggested changes to either the PRSB Wound Care Information model, or implementation guidance, the provider SHOULD contact the PRSB support and maintenance service . |
| P07 | Providers, when procuring new systems or modifying agreements with existing system suppliers, MUST have ensured that supplier organisations are compliant with the clinical safety standards DCB0129 Clinical Risk Management: its Application in the Manufacture of Health IT Systems and |

| Reference | Requirement |
|-----------|---|
| | DCB0160 Clinical Risk Management: its Application in the Deployment and Use of Health IT Systems. |

2.2 IT system requirements

NB: the onus is on PROVIDERS to instruct their SYSTEM suppliers to comply with the STANDARD via their local contracts.

| Reference | Requirement |
|-----------|--|
| ITS01 | A system MUST be compliant with the DAPB4086 information model, version 1.0, which is available via this link . Other formats are also available by emailing the PRSB support service . |
| ITS02 | For each Section of the standard information model that a system implements, a system SHOULD implement all Elements detailed therein. PRSB can provide a minimum viable product (MVP) definition on request for suppliers who are not able to implement the full standard initially. The MVP defines the elements which the implementation “Must Have” to be a safe and effective implementation. |
| ITS03 | A system MUST structure the Elements within the record as per the information model, version 1.0. |
| ITS04 | A system MUST allow a user to record any information in the correct format and under the correct Section. |
| ITS05 | A system MUST implement this standard as per the scope detailed within section 1.4 of this Wound Care Standard Requirements Specification. |
| ITS06 | A system MUST offer configurable viewing of the record as per the provider’s internal workflow requirements. |
| ITS07 | A system MUST conform to regular updates of terminology releases via Technology Reference Data Update Distribution (TRUD) or via the Terminology Server |
| ITS08 | A system MUST ensure that for each record entry within a Section, the system allows the performing professional, person completing the record, date, and location details to be recorded and stored. |
| ITS09 | The timestamps within the Wound Care record MUST be recorded in local time. |
| ITS10 | The interface MUST be compliant with NHS England Accessible Information (AIS) standards. |
| ITS11 | Where changes are made to how a user interacts with the system (for example the user interface) the IT system supplier SHOULD produce appropriate guidance to be made available to the health and/or care organisation. |

| Reference | Requirement |
|-----------|---|
| ITS12 | The system supplier SHOULD ensure Wound Care Information is accessible and updated either in real time, or as close to real time as possible. |
| ITS13 | The contextual information or metadata (performing professional, location, date, person completing the record) SHOULD be recorded and sent as part of any data transfer for the parts where it applies |
| ITS14 | The system SHOULD support role-based access that enables granular access of the IT systems/ electronic health & social care record from multiple settings |
| ITS15 | The system MUST allow professionals to navigate back and forth in the process of completing or partial completion of the entry |
| ITS16 | The system MUST be traceable to the NHS personal demographics service (PDS) or similar service to identify patients, and match them to their health records and information about their GP practice |
| ITS17 | The system MUST only communicate fields that are populated with information. Mandatory fields should always be populated |
| ITS18 | The system SHOULD be able to display Alerts and Risks in an obvious and visible manner |
| ITS19 | The system SHOULD allow recipients to read all the content (any clinical coded data should be carried with the associated text) |
| ITS20 | The system SHOULD provide auto-population of all the elements where this is possible, e.g. details of the professional logged in and their organisation, patient details obtained from other parts of the record. |
| ITS21 | The system SHOULD not display both headings and sub-headings that have the same name. |
| ITS22 | The system MUST be able to show information from the person details, circle of care and general health information & relevant history domains. These domains are not specific to wound care but that information MUST be available to the professional |
| ITS23 | The system MUST be able to show prescribed medications, particularly where these relate to the wound care episode. The wound care record does not include drugs (for example pain relief or antibiotics) that are prescribed in the treatment of the wound, such medications would typically be available in the person's electronic care record |

2.3 Provider and IT system conformance criteria

This section describes the tests that can be measured to indicate that the information standard is being implemented correctly.

| Reference | Criteria |
|-----------|--|
| PITSCC01 | <p>Providers have read the following documents:</p> <ul style="list-style-type: none"> • DAPB4086 Wound Care Information Standard Requirements Specification (this document) • DAPB4086 Wound Care Information Standard – High Level Implementation Guidance • PRSB Wound Care Information model (v1.0) <p>This relates to P01.</p> |
| PITCC02 | <p>The provider ensures that relevant staff can evidence that they have completed training around the recording of Wound Care Information. This relates to P05.</p> |
| PITSCC03 | <p>The provider ensures that the system supports the recording of all mandatory, required, and optional elements. This relates to ITS01; ITS02; ITS03; ITS04; P02; P03; and P04.</p> |
| PITSCC04 | <p>The provider ensures elements in the system are structured as per the Wound Care Information model and in the format specified. This relates to ITS01; ITS02; ITS03; ITS04; ITS05; P03 and P04.</p> |
| PITSCC05 | <p>The Wound Care Information is accessible and updated in either real time, or as near to real time as possible. This relates to ITS13.</p> |
| PITSCC06 | <p>The provider ensures that the PRSB is made aware of any suggested changes to either the PRSB Wound Care Information model, including implementation guidance, through the PRSB support and maintenance service. This relates to P06.</p> |
| PITSCC07 | <p>The system supplier ensures that their provider is made aware of any functional changes that may impact the recording of the DAPB Wound Care Information standard (for example user interface changes) and they provide appropriate support to users. This relates to ITS06 and ITS12.</p> |
| PITSCC08 | <p>The system allows for a viewable audit trail showing the version history of data recorded against the Wound Care Standard, including time(s), date(s) and author(s). This relates to ITS9 and ITS12.</p> |
| PITSCC09 | <p>The interface is compliant with NHSE Accessible Information (AIS) standards. This relates to ITS10</p> |
| PITSCC10 | <p>Providers described in Section 1.4 of the DAPB Requirements specification can evidence compliance with DAPB4086 (this standard). This relates to ITS06; ITS08; P02; P03; P04.</p> |

| Reference | Criteria |
|-----------------|--|
| PITSCC11 | Providers have ensured their system supplier can offer configurable viewing of the record as per the provider's internal workflow requirements. This relates to ITS07. |
| PITSCC12 | Providers have ensured that their system suppliers are compliant with the clinical safety standards DCB0129 Clinical Risk Management: its Application in the Manufacture of Health IT Systems DCB0129: Clinical Risk Management: its Application in the Manufacture of Health IT Systems and that the providers are compliant with DCB0160 Clinical Risk Management: its Application in the Deployment and Use of Health IT Systems DCB0160: Clinical Risk Management: its Application in the Deployment and Use of Health IT Systems . This relates to P07. |
| PITSCC13 | Providers have ensured their system supplier conforms to regular updates of terminology releases via Technology Reference Data Update Distribution (TRUD) or via the Terminology Server . This relates to ITS07 |
| PITSCC14 | Providers have ensured that for each record entry within a section, their system supplier allows metadata (specifically the performing professional, person completing the record, date, time and location details) to be recorded and stored. This relates to ITS08 and ITS09 |
| PITSCC15 | Providers have ensured through their system supplier, that timestamps within the Wound Care are recorded in local time. This relates to ITS09. |
| PITSCC16 | Providers have ensured that the contextual information or metadata (performing professional, location, date, person completing the record) is recorded and sent as part of any data transfer for the parts where it applies. This relates to ITS13 |
| PITSCC17 | Providers have ensured that the system supports role-based access that enables granular access of the IT systems/ electronic health & social care record from multiple settings. This relates to ITS14 |
| PITSCC18 | Providers have ensured that the system allows professionals to navigate back and forth in the process of completing or partial completion of the entry. This relates to ITS15 |
| PITSCC19 | Providers have ensured that the system is traceable to the NHS personal demographics service (PDS) or similar service to identify patients, and match them to their health records and information about their GP practice. This relates to ITS16 |
| PITSCC20 | Providers have ensured that the system only communicates fields that are populated with information. Mandatory fields should always be populated. This relates to ITS17 |
| PITSCC21 | Providers have ensured that the system is able to display Alerts and Risks in an obvious and visible manner. This relates to ITS18. |

| Reference | Criteria |
|-----------------|---|
| PITSCC22 | Providers have ensured that the system allows recipients to read all the content (any clinical coded data should be carried with the associated text). This relates to ITS 19. |
| PITSCC23 | Providers have ensured that the system provides auto-population of all the elements where this is possible, e.g. details of the professional logged in and their organisation, patient details obtained from other parts of the record. This relates to ITS20. |
| PITSCC24 | Providers have ensured that the system should not display both headings and sub-headings that have the same name. This relates to ITS21. |
| PITSCC25 | Providers have ensured that the system is able to show information from the person details, circle of care and general health information & relevant history domains. These domains are not specific to wound care but that information must be available to the professional. This relates to ITS22. |
| PITSCC26 | Providers have ensured that the system is able to show prescribed medications, particularly where these relate to the wound care episode. The wound care record does not include drugs (for example pain relief or antibiotics) that are prescribed in the treatment of the wound, such medications would typically be available in the person's electronic care record. This relates to ITS23. |

3 References

DCB0129 Clinical Risk Management: its Application in the Manufacture of Health IT Systems: <http://www.digital.nhs.uk/isce/publication/dcb0129>

DCB0160 Clinical Risk Management: its Application in the Deployment and Use of Health IT Systems: <http://www.digital.nhs.uk/isce/publication/dcb0160>

DAPB4086 webpage:

Short URL: <http://www.digital.nhs.uk/isce/publication/dapb4086>

Full URL: <https://digital.nhs.uk/data-and-information/information-standards/information-standards-and-data-collections-including-extractions/publications-and-notifications/standards-and-collections/dapb4086-wound-care>

Health and Social Care Act (Section 250):

<https://www.legislation.gov.uk/ukpga/2012/7/section/250>

Information Governance Framework: <https://transform.england.nhs.uk/information-governance/guidance/summary-of-information-governance-framework-shared-care-records/>

PRSB Personalised Care and Support Plan standard: <https://theprsb.org/standards/personalisedcareandsupportplan/>

PRSB Core Information Standard: <https://theprsb.org/core-information-standard-v2-0/>

PRSB Wound Care Information standard webpage: <https://theprsb.org/standards/wound-care-standard/>

PRSB Provenance data: <https://theprsb.org/standards/provenance/>

PRSB support service: <https://theprsb.org/standards/support/>

National wound care strategy programme: <https://www.nationalwoundcarestrategy.net/>