

APPENDIX 1 – ADDITIONAL INFORMATION ON PURPOSES FOR PROCESSING

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The list may be used in any care setting or scenario, including, but not limited to, use of shared data in organisational care settings/services/teams and collaborative service delivery across organisations, such as Multi-disciplinary Teams (MDTs), Integrated Neighbourhood Teams (INTs) or alike.

The current use cases are set out below and for each use case there is:

1. A simple reference/identifier for the use case.
2. A statement regarding the general nature of the activity concerned. For example: it occurs at the point of care or directly supports tasks at the point of care and would typically be referred to as direct care or perhaps individual care.
3. A simple, brief statement providing the context for the use case.
4. A simple list of the typical tasks that the use case would include.
5. A statement regarding the type of data that is required as part of the use case:
 - a. Identifiable
 - b. Pseudonymous
 - c. Anonymous.

Reference to 'a professional' in the document should be taken to mean a health or social care professional (with professional registration) or an administrative member of the team working under the supervision of a care professional.

Control over what users of applications can access is assessed in the DPIA for the relevant sharing initiative, considering the functions of the relevant Information Assets. It is not the function of this 'purpose' appendix to set access controls beyond the expectation of how identifiable the data is at any point in the activity.

'Analytics and Intelligence functionality/dashboards' – this describes where information that has been analysed and collated is presented to the end user.

Care Delivery at the Point of Care

Point of care – a professional makes use of the shared record:

- as part of a point of care activity (requires an identifiable data view)
- or as part of remotely monitored care (requires an identifiable data view)

Triage and Assessment

Point of care – a professional makes use of the shared record:

- as part of a point of care activity (requires an identifiable data view)
- as part of a triage or needs assessment activity (requires an identifiable data view)
- as part of reviewing referrals received (requires an identifiable data view)
- as part of matching patient's specific needs with appropriate treatment, pathways and services options (requires an identifiable data view)
- or as part of remotely monitored care (requires an identifiable data view)
- or as part of managing technology enabled self-care (requires an identifiable data view)

Point of Care Activity Preparation

Point of care – a professional makes use of the shared record:

- as part of preparing for a point of care activity (requires an identifiable data view)
- as part of preparing for a consultation, clinic or other meetings with or regarding the patient (requires an identifiable data view)
- or as part of remotely monitored care (requires an identifiable data view)

Point of Care Activity Follow-up

Point of care – a professional makes use of the shared record:

- as part of following up after a point of care activity (requires an identifiable data view)
- as part of following up after a consultation, clinic or other meetings with or regarding the patient (requires an identifiable data view)
- or as part of remotely monitored care (requires an identifiable data view)

Analytics and Intelligence based Integrated Patient Dashboards

Point of care – a professional makes use of the integrated patient dashboards generated by the analytics and intelligence functionality while making use of the shared record:

- to have a holistic view of a patient's data with the data display prioritised according to the requirements of the specific dashboard (requires an identifiable data view)

Case Finding

Point of care - a professional makes use of the analytics and intelligence functionality:

- to access a specific caseload (requires an identifiable data view)
- to identify individual cases for care, treatment and management (requires an identifiable data view)

Caseload Management

Point of care – a professional makes use of the analytics and intelligence functionality:

- to access a specific caseload (requires an identifiable data view)
- to record observations regarding an individual patient where the shared care record is used for direct recording (requires an identifiable data view)
- to record treatment and management plans for an individual patient where the shared care record is used for direct recording (requires an identifiable data view)
- to manage integrated care caseloads (requires an identifiable data view)
- to manage condition specific caseloads e.g. diabetes, HF, LD, SMI (requires an identifiable data view)
- to manage care at home caseloads (requires an identifiable data view)
- to manage virtual wards (requires an identifiable data view)
- to manage technology enabled self-care (requires an identifiable data view)

Direct Care Alerting and Notifications

Point of care - details of alerts and status notifications are reported to professionals and teams by means of dashboards and reports and by means of secure emailed notifications to relevant professionals with a legitimate relationship highlighting events such as:

- accident and emergency attendance (requires an identifiable data view)
- admissions (requires an identifiable data view)
- discharges (requires an identifiable data view)
- transfers of care (requires an identifiable data view)
- initiating referrals to specialist teams e.g. crisis and rapid response teams (requires an identifiable data view)
- initiating responses by to specialist teams (requires an identifiable data view)

Discharges and Discharge Planning and Management

Point of care - supporting professionals with the management of discharges:

- confirming patient readiness for discharge (requires an identifiable data view)
- preparing discharge plans (requires an identifiable data view)
- communicating discharge plans to all involved in managing patient discharges (requires an identifiable data view)
- preparing post-discharge management plans (requires an identifiable data view)
- communicating post-discharge management plans (requires an identifiable data view)