**Cheshire and Merseyside Health and Care Partnership**

**Combined Intelligence for Population Health Action (CIPHA):**

**Data Sharing Agreement (Tier Two)**

**Workstream:**

**Population Health**

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| **Version Control** |
| V1.0 | Final for Distribution |
| V1.1 | Minor amendments made to Section 5, signature page and Annex B to correct erroneous references to COVID workstream DSA |
| V1.2 | Correction of St Helens CCG GP practice codes |
| V1.3 | Page 7: Insertion of clarification for social care data “**Note:** Use cases for Population Health can be place specific as well as ICS wide….”Annex B. P 26 1.5 Events: Deletion of ‘Case Notes’ as a data item to be collected for social carePage 11: Details of data destruction and retention to add note on social care data |
| V1.4 | Merger N83604, N83060 and N83023 – now N83023 Atlas Medical Practice.Updated “Terms of Agreement End Date” to March 2023  |

**Data Sharing Agreement Tiered Framework**

There are three tiers to the Data Sharing Agreement Tiered Framework:

## Tier Zero Memorandum of Understanding

Overarching Memorandum of Understanding which sets out an organisations agreement in principle to share information with the partner organisations in a responsible way. The tiered approach provides a governance framework to standardise procedures and processes when sharing confidential personal information between partners where there is a lawful basis to do so. The Tier Zero is signed by a Chief Executive (or equivalent) and commits to their organisation operating within the agreed framework of data sharing. Only one Tier Zero needs to be signed regardless of the number of Tier One and Tier Two documents beneath it.

## Tier One Data Sharing Agreement - Standards

These are the overarching standards which outline the agreed procedures for sharing confidential information. The document recognises that not all organisations which are party to the agreement will have the same assurance requirements (such as the Data Security and Protection Toolkit) and therefore sets the minimum standard of each of the participating organisations. The document sets the standards for obtaining, recording, holding, using and sharing of information and outlines the supporting legislation, guidelines and documents which govern information sharing between partners. The Tier One is signed by the designated responsible officer for each partner organisation, for the whole C&M Health and Care Partnership.

## Tier Two Data Sharing Agreement

The Tier Two provides a template for the safe sharing of personal data. The agreement shows what information should be shared and how, under what circumstances and by whom, and is tailored to individual partnerships/projects. Each Tier Two Data Sharing Agreement will need to be signed off by each participating organisation. Tier Two Data Sharing Agreements could be for all partners at Tier Zero, or a selected cohort of partners who are participating in a specific project.

Each Tier Two is signed by the Senior Information Risk Owner (SIRO) and/or Caldicott Guardian (CG), alternatively the Chief Executive or equivalent if there is no SIRO/CG, for each of the partner organisations.

## Clause

Sharing agreements negotiated prior to the commencement of the Tiered framework and related Share2Care documentation are not terminated or otherwise varied by the implementation of the Share2Care documentation.

Share2Care recognise that each partner organisation will have their own local policies and procedures regarding information security and confidentiality and to make clear that this Tier Two, and the Tier Zero and Tier One documents, are not designed to negate or supersede existing local policies but to enhance them by facilitating cross-boundary dialogue and agreement.

**Tier Two - Data Sharing Agreement**

1. Title and Reference Code

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| Project | Cheshire and Merseyside Health and Care Partnership |
| Workstream | Population Health: Combined Intelligence for Population Health Action (CIPHA) |

1. Population Health Intelligence

This Tier Two sharing agreement is for:

## Population Health: Combined Intelligence for Population Health Action (CIPHA Programme)

This Data Sharing Agreement (DSA) covers the sharing of data across Cheshire and Merseyside Health and Care Partnership to support a set of Population Health analytics designed to inform both population level planning and support the targeting of direct care for populations.

1. Parties to the Agreement

The DSA is between the 9 Clinical Commissioning Groups, 367 General Practices, 9 Local Authorities, and 20 NHS Providers that make up Cheshire and Merseyside Health and Care Partnership, with Graphnet/System C as a Data Processor, Arden and Greater East Midlands Commissioning Support Unit (AGEMCSU) CSU as a Data Processor, and Midlands and Lancashire CSU (MLCSU) as a Data Processor.

The **Data Controllers** are the GP Practices; Local Authorities; and 20 NHS Providers from where the data is sourced.

The **Data Processors** are the Cheshire and Merseyside Health and Care Partnership Combined Intelligence for Population Health Action (CIPHA) Intelligence Team, together with the system supplier Graphnet using System C; AGEMCSU and MLCSU.

The table below explains the organisations receiving data as part of this DSA and the data controllers providing data, and data processors.

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| Agreement Owner/Host Organisation | Christine Walters Director of InformaticsSt Helens and Knowsley Teaching Hospitals NHS Trust |

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| Receiving Organisation (s) | NHS Cheshire CCG NHS Halton CCG NHS Knowsley CCG NHS Liverpool CCGNHS South Sefton CCGNHS Southport and Formby CCG NHS St Helens CCGNHS Warrington CCG NHS Wirral CCGAll GP Practices within each of these CCGs - please see list at Annex A. Alder Hey Children’s NHS Foundation TrustBridgewater Community Healthcare NHS Foundation TrustCheshire and Wirral Partnership NHS Foundation Trust Countess of Chester Hospital NHS Foundation Trust East Cheshire NHS TrustLiverpool Heart and Chest NHS Foundation TrustLiverpool University Hospitals NHS Trust (Royal, Aintree & LCL) Liverpool Women’s NHS Foundation TrustMersey Care NHS Foundation TrustNorth West Boroughs Healthcare NHS Foundation Trust NWASPrimary Care 24Southport & Ormskirk Hospital St Helen’s Care RecordSt Helens and Knowsley Teaching Hospitals NHS Trust The Clatterbridge Cancer Centre NHS Foundation Trust The Mid Cheshire Hospitals NHS Foundation TrustThe Walton Centre NHS Foundation TrustWarrington and Halton Hospitals NHS Foundation Trust Wirral Community NHS Foundation TrustWirral University Teaching Hospital NHS Foundation TrustCheshire East CouncilCheshire West and Chester Council Halton Borough CouncilKnowsley Borough Council Liverpool City Council Sefton CouncilSt Helens Council Wirral CouncilWarrington Borough CouncilWarrington GP OOH Service Wirral GP OOH Service CWP Out of Hours ServiceSouthport And Formby Health: 7day GP Service |

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|  | St Helens Rota OOHSouth Sefton GP Extra OOHNHS England and Improvement (Aggregate-anonymised only) |
| Providing Organisation(s) (Data Controllers) | NHS Cheshire CCG NHS Halton CCG NHS Knowsley CCG NHS Liverpool CCGNHS South Sefton CCGNHS Southport and Formby CCG NHS St Helens CCGNHS Warrington CCG NHS Wirral CCGAll GP Practices within each of these CCGs - please see list at Annex A. Arden and Greater East Midlands Commissioning Support Unit (AGEMCSU) Alder Hey Children’s NHS Foundation TrustBridgewater Community Healthcare NHS Foundation TrustCheshire and Wirral Partnership NHS Foundation Trust Countess of Chester Hospital NHS Foundation Trust East Cheshire NHS TrustLiverpool Heart and Chest NHS Foundation TrustLiverpool University Hospitals NHS Trust (Royal, Aintree & LCL) Liverpool Women’s NHS Foundation TrustMersey Care NHS Foundation TrustNorth West Boroughs Healthcare NHS Foundation Trust NWASPrimary Care 24Southport & Ormskirk Hospital St Helen’s Care RecordSt Helens and Knowsley Teaching Hospitals NHS Trust The Clatterbridge Cancer Centre NHS Foundation Trust The Mid Cheshire Hospitals NHS Foundation TrustThe Walton Centre NHS Foundation TrustWarrington and Halton Hospitals NHS Foundation Trust Wirral Community NHS Foundation TrustWirral University Teaching Hospital NHS Foundation TrustCheshire East CouncilCheshire West and Chester Council Halton Borough CouncilKnowsley Borough Council Liverpool City Council Sefton CouncilSt Helens Council Wirral Council |

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|  | Warrington Borough CouncilWarrington GP OOH Service Wirral GP OOH Service CWP Out of Hours ServiceSouthport And Formby Health: 7day GP Service St Helens Rota OOHSouth Sefton GP Extra OOHAlso, datasets from central Government including from NHS England, NHS Digital, NIMS and NIVS e.g. testing, vaccinations, and health conditions. |
| Data Processors | Graphnet/System CArden and Greater East Midlands Commissioning Support Unit (AGEMCSU) Midlands and Lancashire Commissioning Support Unit |

1. Terms of the Agreement

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| Start Date | 30 June 2021 |
| End Date | 31st March 2023 |

1. Purpose of the Data Sharing

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| Purpose for Data Sharing | The overarching purpose for data sharing is to support a set of Population Health analytics for population level planning and improvement of outcomes and also the targeting of direct care to vulnerable populations in need.There are four main purposes, which can be described as follows:-**Use Case 1: Epidemiology Reporting: Understanding health needs of populations, wider determinants of health and inequality for the improvement of outcomes:** The data would be used to create intelligence, with the aim of understanding and improving physical and mental health outcomes, promote wellbeing and reducing health inequalities across an entire population.Specific types of analysis that may be undertaken include: Healthneeds analysis understanding population’s health outcomes and deficits; Demographic forecasting, disease prevalence and |

relationships to wider determinants of health; Geographic analysis and mapping, socio-demographic analysis and insight into inequalities.

**Use Case 2: Predicting outcomes and population stratification of vulnerable populations:** The data will be used to predict the risk of outcomes for individuals in order that services can be targeted proactively to those most vulnerable. The data will be re- identified for the purposes of direct care.

**Use Case 3: For planning current services and understanding future service provision:** The data would be used to create intelligence on service provision to understand current service capacity and demand and forecasting future service demand to ensure enough provision is available for populations in need. This may include forecasting disease and prevalence and understanding how it impacts on service provision.

**Use Case 4: For evaluation and understanding causality:** The data would be used to evaluate causality between determinants of health and outcomes. Also, used to understand effectiveness of certain models of care across the health and care system.

1. Data Protection Impact Assessment

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| Data Protection Impact Assessment (DPIA) | The DPIA can be found embedded below:HCP C&M CIPHADPIA Population Hea |

1. Data Details

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| Data to be Shared | Annex B provides the categories of data to be shared from GP; Acute; Mental Health; Community; and Social Care (children and adult). The table incudes a brief description of the data categories and the use case(s) within which the data will be used. The specific data items will only be coded (structured) data, that is to say no free text (unstructured) data.**Note:** Use cases for Population Health can be place specific as well as ICSwide. Data Items listed in Annex B cover the broad set of data required. This data will flow for usage for population health, only on instruction from the data |

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|  | controller. Where the data controller does not perceive the data item is required for population health then the data item will not flow.AGEMCSU will also provide a set of data to the CIPHA programme for linkage with the above via consistent pseudonym. The datasets being linked to include those listed in the DSA agreement with NHS Digital which is inclusive of, but not limited to SUS (secondary care), CSDS (Community care), MHMDS (Mental Health), GDPPR (General Practice), NWAS (Ambulance), COVID Testing andCOVID Vaccinations. |
| Lawful Basis for Data Sharing | **Legal Basis under the General Data Protection Regulation (GDPR)**Below explains how this agreement is compliant with GDPR:6 (1) (e) Necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller9(2)(h) Necessary for the reasons of preventative or occupational medicine, for assessing the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or management of health or social care systems and services on the basis of Union or Member State law or a contract with a health professional9(2)(i) Necessary for the reason of public interest in the area of public health, such as protecting against serious cross border threats to health or ensuring high standards of healthcare and of medicinal products or medical devices9(2)(j) Necessary for archiving purposes in the public interest, or scientific and historical research purposes or statistical purposes in accordance with Article 89 (1)**Common Law Duty of Confidentiality**For Population Health the Common Law Duty of Confidentiality requires that there should be no use or disclosure of any confidential patient information for any purpose other than the direct clinical care of the patient to whom it relates, unless:* The patient explicitly consents to the use or disclosure;
* The disclosure is required by law;
* The disclosure is permitted under a statutory process that sets aside the duty of confidentiality.

Appropriately psudonymised or aggregated data is not owed a duty of confidentiality. Under this Data Sharing Agreement the Common Law Duty of Confidentiality does not apply, to data which is pseudonymised, and presented as aggregate data.For patient identifiable data used for direct patient care the Common Law Duty of Confidentiality is addressed by implied consent. “Section 251B [of the Health |

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|  | and Social Care Act 2012 (as amended by the Health and Social Care (Safety and Quality) Act 2015)] and implied consent under CLDC will together provide the lawful basis to share in most cases of direct care. In these cases, and any cases of direct care based on explicit consent, the national data opt-out will not apply.” [https://digital.nhs.uk/services/national-data-opt-out/operational-policy-](https://digital.nhs.uk/services/national-data-opt-out/operational-policy-guidance-document/appendix-2-definitions) [guidance-document/appendix-2-definitions](https://digital.nhs.uk/services/national-data-opt-out/operational-policy-guidance-document/appendix-2-definitions)The right to object under S21 of the General Data Protection Regulation 2016, as enacted, is also relevant. Patients and service users have a right to object to their medical information being used in order to provide safe and effective care, and have the right to register this objection in writing, or verbally, to the clinician concerned.The section: **Role Based Access Controls**, and **De-identification and sensitive codes** explains the controls in place in more detail. |
| Access Controls | **Role Based Access Controls**Role Based Access Controls (RBAC) will be applied to a set of ‘data marts’ as follows:**Patient Identifiable Data:** Only those with a legitimate direct care relationship with the individual will be granted access. Access will be granted by individual Data Controllers and for GP Practices for their populations as the Data Controller.**Pseudonymised Data:** CCG and Local Authority Staff i.e. place-based intelligence teams (including staff with honorary contracts with those organisations who may undertake work on their behalf) will be granted access for the purposes described in **Section 5: Purpose of the Data Sharing**. All analytical projects undertaken with the data will be listed in the Data Access and Asset Matrix (see ‘Governance’ below) explaining the specific purpose, requestor, output, legal basis and timescale.Other parties to this Data Sharing Agreement that wish to have access to the data for one of the purposes listed in Section 5, will be required to go via a governance gateway explained below in **Governance** for approval of such data access.**Anonymised-aggregate Data:** Access to individuals employed by organisations listed in **Section 3: Parties to the Agreement** will be granted access to all anonymised-aggregate data. |
| Governance | The programme will maintain and strictly enforce a Data Access and Data Asset matrix to ensure requests to use the CIPHA regional data sources ensure full |

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|  | compliance with the purposes laid out in **Section 5: Purpose of the Data Sharing** and that data is securely shared and appropriated.This process will be governed through a regional Data Asset and Access Group (DAAG) that will draw its membership from: the regional Clinical Informatics Advisory Group (CIAG); GP and Local Medical Committees; Information Governance specialists; Local Authority and the regional Data Services for Commissioners Regional Offices (DSCRO) service.This matrix will detail projects undertaken with the pseudonymised data by the CCG and Local Authority staff i.e. place-based intelligence teams and be made available to parties within this sharing agreement on a monthly basis, so they are informed of the specific uses of the data.Other parties to this sharing agreement that wish to have access to the pseudonymised data will be required to submit a Data Access Request Form on a project by project basis to the Data Asset and Access Group (DAAG) for an assessment that:-* Purpose aligns with the purpose of this agreement;
* A Data Protection Impact assessment (DPIA) is completed, if not covered by an existing DPIA;
* A separate Data Sharing Agreement (Tier Two) is completed for signature by all data controllers, if not covered by this Tier Two DSA;
* Ensures that individual data controllers are also informed of the Data Access Request, and can lodge a concern regarding data sharing with the CIPHA team for discussion, and/or withdraw their service user data from any project at any time.

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| De- identification, data minimisation, and handling of restricted/ sensitive codes | **De-identification of Patient Identifiable Data (Pseudonymisation)**To satisfy the Confidentiality: NHS Code of Practice, data for purposes other than direct care will be de-identified. De-identification is achieved through secure and robust pseudonymisation (Encryption method: SHA256). This allows data to be effectively linked without using clear or sharing patient identifiers. This data will still be at person-level, but the identifiable fields will be removed from the data. This includes removal of names and addresses. Date of Birth will be formatted to age; post code will be shortened. Pseudonyms will be linkable across datasets. Re-identification will be possible via a set of controlled processes for those who have been granted the correct permissions, as per ‘**Role Based Access Controls** section.**Anonymised Data**Anonymised data will meet the ICO standards for anonymisation including small number suppression.**Sensitive Codes**Sensitive data excluded from retrieval follows the recommendations made by The Royal College of General Practitioners (RCGP) ethics committee and the Joint GP IT Committee:* Gender reassignment.
* Assisted conception and in vitro fertilisation (IVF)
* Sexually transmitted diseases (STD)
* Termination of pregnancy
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| National Data Opt Out Programme | Type 1 opts out (those who do not want their information shared outside of General Practice for purposes other than direct care) will be upheld. This means that data for people who have objected to sharing their data will **not flow** from the GP record into the Graphnet solution. |
| Fair Processing | Organisations party to this agreement will comply with Fair Processing guidelines ensuring Privacy Notices accurately reflect the uses of data for their organisation.A project specific Privacy Notice will be available on a public facing project website. |
| Details of retention and destruction | The data will be retained for as long as the purpose(s) described above remains valid or a new legal purpose agreed. This will be in line with the Records Management Code of Practice for Health and Social Care 2016.Where children’s social care records or adult social care records data flow is approved by the data controller, the data controller will apply an appropriate and |

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|  | specific retention period to the specific records involved after which time, data should be deleted from the CIPHA system. The CIPHA team will review data on 6 monthly basis to ensure that it is compliant with the retention period guidelines set by the data controller. |

# Workstream: Population Health Data Sharing Agreement (Tier Two)

**Signatory Sheet**

Each party to this Data Sharing Agreement (Tier Two) is required to complete & sign below.

## Data Sharing Agreement Owner – Host Organisation - St Helens and Knowsley Teaching Hospitals NHS Trust

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| Signed for and on behalf of: | St Helens and Knowsley Teaching Hospitals NHS Trust |
| Name | Christine Walters |
| Role | Director of Informatics |
| Signature |  |
| Date | 19/07/2021 |

**Party to the Data Sharing Agreement – Partner Organisation**

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| Signed for and on behalf of:GP Practice Code (If applicable): |
| Name |
| Role / Job Title e.g. Chief Executive/SIRO/Caldicott Guardian |
| Signature |
| Date |

**Please return to the following:**

CIPHA@merseycare.nhs.uk

**ANNEX A – List of intended participating GP Practices in Cheshire and Merseyside (Subject to change following signature)**

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| **Practice Code** | **Practice Name** |
| **Halton** |  |
| N81035 | Appleton Village Surgery |
| N81037 | Beeches |
| N81011 | Bevan Group Practice |
| N81119 | Hough Green Health Park |
| N81064 | Newtown |
| N81619 | Oaks Place Surgery |
| N81045 | Peel House |
| N81651 | Upton Rocks |
| N81096 | Brookvale |
| N81019 | Castlefields Health Centre |
| N81066 | Grove House |
| N81072 | Murdishaw Health Centre |
| N81054 | Weaver Vale Practice |
| N81057 | Tower House Practice |
| **Knowsley** |  |
| N83015 | Bluebell Lane Medical Practice |
| N83610 | Colby Medical Centre in Bluebell Centre |
| N83025 | Cornerways Medical Centre |
| N83014 | Dinas Lane Medical Centre (Pat Puddifer) |
| N83609 | Dr K T Kyaw (Cedar Cross) |
| N83601 | Dr K F Thong's Practice (Macmillan Surgery) |
| N83018 | Dr P Rigby's Practice |
| N83047 | Dr Rashid's Practice (Tarbock Medical Centre) |
| N83033 | Dr R I King's Practice (St Laurences Medical Centre) |
| N83621 | Hillside House Surgery in Bluebell Centre |
| N83605 | Hollies Medical Centre |
| N83043 | Longview Primary Care Centre |
| N83028 | Manor Farm Primary Care Resource Centre |
| N83032 | Millbrook Medical Centre |
| N83633 | Nutgrove Villa Surgery |
| N83024 | Park House Medical Centre |

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| N83030 | Pilch Lane Surgery |
| N83603 | Prescot PCRC |
| N83622 | Primrose Medical Practice in Bluebell Centre |
| N83619 | Roby Medical Centre |
| N83031 | Roseheath Surgery |
| N83013 | The Health Centre Surgery |
| N83608 | Towerhill Primary Care Res & Comm Centre |
| N83055 | Trentham Medical Centre |
| N83009 | Wingate Medical Centre |
| **Liverpool** |
| N82103 | Anfield Group Practice |
| N82669 | Great Homer Street Medical Centre |
| N82074 | Old Swan HC. |
| N82037 | Westmoreland GP Centre |
| N82094 | Belle Vale Health Centre |
| N82058 | Rock Court Surgery |
| N82002 | Yew Tree Centre |
| N82104 | Stoneycroft MC |
| N82090 | Green Lane MC |
| N82101 | Kirkdale Medical Centre |
| N82079 | Greenbank Rd Surgery |
| N82009 | Grassendale Medical Practice |
| N82022 | Edge Hill HC |
| N82062 | Fulwood Green MC |
| N82001 | Margaret Thompson M C |
| N82034 | Village Surgery |
| N82092 | The Valley Medical Centre |
| N82106 | The Village Medical Centre |
| N82110 | Long Lane Medical Centre |
| N82650 | Speke Health Centre |
| N82115 | Vauxhall Health Centre |
| N82003 | Dovecot HC |
| N82059 | The Surgery (Greenbank Drive) |
| N82067 | Benim MC |
| N82076 | Brownlow at Princes Park |

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| N82041 | Oak Vale Medical Centre |
| N82024 | West Derby Medical Centre |
| N82086 | Abingdon Family Health Centre |
| N82014 | Lance Lane |
| N82046 | Sefton Park MC |
| N82617 | Brownlow Health @ Marybone |
| N82108 | Rutherford Medical Centre |
| N82117 | Brownlow Group Practice |
| N82648 | Poulter Road Medical Centre |
| N82099 | Mere Lane Group Practice |
| N82093 | Derby Lane MC |
| N82036 | Netherley Health Centre |
| N82035 | Mather Avenue |
| N82651 | Stanley Medical Centre |
| N82646 | Drs Hegde and Jude's Practice |
| N82053 | Aintree Park Group Practice |
| N82070 | The Elms MC |
| N82073 | The Ash Surgery |
| N82113 | Fairfield General Practice |
| N82670 | Park View |
| N82095 | Albion Surgery |
| N82664 | Rocky Lane Medical Centre |
| N82655 | Moss Way Surgery |
| N82083 | Jubilee Medical Centre |
| N82048 | Walton Medical Centre |
| N82091 | Riverside HC |
| N82011 | Priory Medical Centre |
| N82662 | Dunstan Village Group Practice |
| N82050 | Gateacre Medical Centre |
| N82641 | Sandringham MC |
| N82026 | Penny Lane Surgery |
| N82065 | Earle Road Medical Centre |
| N82645 | Brownlow at Kensington |
| N82097 | Grey Road Surgery |
| N82019 | Langbank Medical Centre |

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| N82663 | Hornspit MC |
| N82082 | St James MC |
| N82671 | Bigham Road MC |
| N82087 | Gillmoss Medical Centre |
| N82668 | Walton Village Medical Centre |
| N82018 | Ellergreen Medical Centre |
| N82084 | Gateacre Brow |
| N82081 | Islington House |
| N82078 | Bousfield Health Centre |
| N82004 | Garston Family Health Centre |
| Y00110 | West Speke Health Centre |
| N82633 | Knotty Ash MC |
| N82116 | Hillfoot Health |
| N82676 | Fir Tree Medical Centre |
| N82077 | Bousfield Surgery |
| N82052 | Townsend Medical Centre |
| N82107 | Mossley Hill Medical Centre |
| N82049 | Westminister Medical Centre |
| N82033 | Dingle Park Practice |
| N82678 | Stopgate Lane Medical Centre |
| N82066 | Woolton House Medical Centre |
| N82109 | Speke Neighbourhood Health Centre |
| N82089 | Picton Medical & Children's Centre |
| N82039 | Storrsdale Medical Centre |
| N82054 | Abercromby Holistic Health Centre |
| **Southport & Formby** |
| N84012 | Ainsdale Medical Centre |
| N84014 | Ainsdale Village Medical Centre |
| N84002 | Aintree Road Medical Centre |
| N84020 | Blundellsands Medical Centre |
| N84015 | Bootle Village Surgery |
| N84023 | Bridge Road Medical Centre |
| N84013 | Christiana Hartley Medical Centre |
| N84006 | Chapel Lane Medical Centre |
| N84017 | Churchtown medical Centre |

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| N84026 | Crosby Village Surgery |
| N84627 | Crossways PC24 Surgery |
| N84005 | Cumberland House Medical Centre |
| N84001 | DR Vitty, Pfeiffer & Berni |
| N84010 | Maghull Family Surgery |
| N84041 | 30 Kingsway |
| N84007 | Drs Misra & Bird |
| N84011 | Eastview Surgery |
| N84029 | Ford Medical Practice |
| N84036 | Freshfield Surgery |
| N84004 | Glovers Lane Surgery |
| N84003 | High Pastures Surgery |
| N84626 | Hightown Village Surgery |
| N84617 | Kew Surgery |
| N84038 | Concept House Surgery |
| N84037 | Lincoln House |
| N84605 | Litherland Town Hall PC24 |
| N84624 | Maghull Health Centre DR Sapre |
| Y00446 | Maghull PC24 |
| N84614 | Marshside Surgery |
| N84016 | Moore Street |
| N84630 | Netherton Practice |
| N84019 | North Park Surgery |
| N84008 | Norwood Surgery |
| N84027 | Orrell Park Medical Centre |
| N84034 | Park Street Surgery |
| N84615 | Rawson Road Surgery |
| N84611 | Roe Lane Surgery |
| N84043 | Seaforth Village UC24 |
| N84021 | St Marks Medical Centre |
| N84028 | Strand Medical Centre |
| N84613 | The Corner Surgery |
| N84625 | The Family Surgery |
| N84024 | The Grange Surgery |
| N84618 | The Hollies |

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| N84018 | The Village Surgery Formby |
| N84621 | Thornton Village Surgery |
| N84025 | Westway Medical Centre |
| N84035 | 15 Sefton Road Dr McElroy |
| **Warrington** |  |
| N81637 | Cockhedge Medical Centre |
| N81097 | Dallam Lane Medical Centre |
| N81048 | Fearnhead Cross Medical Centre |
| N81048001 | Fearnhead Cross Medical Centre - Longford Branch Surgery |
| N81056 | Folly Lane Medical Centre |
| N81107 | Manchester Road Surgery |
| N81075 | Stockton Heath Medical Centre |
| N81623 | Stretton Medical Centre |
| N81623001 | Stretton Medical Centre - Stretton Branch Surgery |
| N81645 | 4 Seasons Medical Centre |
| N81114 | Birchwood Medical Centre |
| N81014 | Brookfield Surgery |
| N81028 | Causeway Medical Centre |
| Y04925 | Chapelford Health Plus |
| N81059 | Culcheth Medical Centre |
| Y01108 | Fairfield Surgery |
| N81089 | Greenbank Surgery |
| N81012 | Guardian Street med/ctr |
| N81041 | Helsby Street med/ctr |
| N81007 | Holes Lane Medical Centre |
| N81065 | Latchford Medical Centre |
| N81109 | Padgate Medical Centre |
| N81083 | Parkview Medical Centre |
| N81020 | Penketh Health Centre |
| N81036 | Springfields Medical Centre |
| N81628 | The Eric Moore Partnership |
| N81108 | The Lakeside Surgery |
| N81122 | Westbrook Medical Centre |
| **Wirral** |  |
| N85648 | Blackheath Medical Centre |

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| N85017 | Cavendish Medical Centre |
| N85027 | Central Park Group Practice |
| N85633 | Church Road Medical Centre |
| N85006 | Civic Medical Centre |
| N85009 | Commonfield Road Surgery |
| N85015 | Devaney Medical Centre |
| N85005 | Eastham Group Practice |
| N85629 | Egremont Medical Centre |
| N85031 | Gladstone Medical Centre |
| N85032 | Greasby Group Practice |
| N85052 | Grove Road Surgery |
| N85021 | Hamilton Medical Centre |
| N85037 | Heatherlands Medical Centre |
| N85007 | Heswall & Pensby Group Practice |
| N85022 | Holmlands Medical Centre |
| N85059 | Hoylake & Meols Medical Centre |
| N85046 | Hoylake Road Medical Centre |
| N85054 | Kings Lane Medical Centre |
| N85640 | Leasowe Medical Practice |
| N85616 | Liscard Group Practice |
| N85023 | Manor Health Centre |
| N85002 | Marine Lake Medical Practice |
| N85001 | The Estuary Medical Practice |
| N85625 | Miriam Primary Care Group (Miriam) |
| N85625001 | Miriam Primary Care Group (Earlston & Seabank) |
| N85625002 | Miriam Primary Care Group (Field Road Health Centre) |
| N85028 | Moreton Cross Group Practice |
| N85040 | Moreton Health Clinic |
| N85048 | Moreton Medical Centre |
| N85034 | Parkfield (Oates) |
| N85044 | Paxton Medical Group (Claughton) |
| N85044002 | Paxton Medical Group (Fender Way) |
| N85643 | Prenton Medical Centre |
| N85643001 | Woodchurch Medical Centre |
| N85016 | Riverside Surgery |

|  |  |
| --- | --- |
| N85058 | Silverdale Medical Centre |
| N85024 | Somerville Medical Centre |
| N85617 | Spital Surgery |
| N85020 | St Catherine's Surgery |
| N85012 | St Georges Medical Centre |
| N85025 | St Hilary Group Practice |
| N85051 | Sunlight Group Practice |
| N85057 | Teehay Lane Medical Centre |
| N85003 | The Allport Surgery |
| N85047 | The Orchard Surgery |
| N85018 | The Villa Medical Centre |
| N85620 | The Village Medical Centre |
| N85014 | Townfield Health Centre |
| N85013 | Upton Group Practice |
| N85634 | Vittoria MC (Karamputi) |
| N85038 | Vittoria MC (Green) |
| N85008 | West Wirral Group Practice |
| N85019 | Whetstone Medical Centre |
| **Cheshire** |  |
| N81001 | Audlem |
| N81002 | Kenmore Medical Centre |
| N81005 | Helsby Health Centre |
| N81006 | Bunbury Medical Practice |
| N81008 | Cedars |
| N81009 | Heath Lane Medical Centre |
| N81010 | Nantwich Health Centre |
| N81013 | High Street Surgery |
| N81016 | Millcroft |
| N81018 | Tarporley\_RS |
| N81022 | Bollington Medical Centre |
| N81024 | Swanlow Lane |
| N81025 | Firdale Medical Centre |
| N81026 | Toft Road Surgery |
| N81027 | Readesmoor Medical Group Practice |
| N81029 | South Park Surgery |

|  |  |
| --- | --- |
| N81030 | The Knoll Surgery |
| N81031 | Tarporely Health Centre |
| N81032 | Ashfields PCC |
| N81033 | George Street Surgery |
| N81034 | Boughton Health Centre |
| N81038 | Malpas Surgery/Laurel Bank |
| N81039 | The Oaklands |
| N81040 | High Street |
| N81042 | Manchester Road Medical Centre |
| N81043 | Haslington |
| N81044 | Hungerford |
| N81046 | Park Medical Centre |
| N81047 | Kiltearn |
| N81049 | Annandale Medical Centre |
| N81050 | Great Sutton - Dr Griffith |
| N81051 | Weaverham |
| N81052 | Lawton House Surgery |
| N81053 | Earnswood |
| N81055 | Watling Street |
| N81060 | Neston Surgery |
| N81061 | Witton Street |
| N81062 | Cumberland House |
| N81063 | York Road Group Practice |
| N81067 | Oakwood MC |
| N81068 | Grosvenor |
| N81069 | Chelford Surgery |
| N81070 | Handforth Health Centre |
| N81071 | Scholar Green |
| N81074 | Launceston |
| N81077 | Holmes Chapel Health Centre |
| N81079 | The Elms Medical Centre |
| N81080 | Northgate Medical Centre |
| N81081 | Garden Lane Medical Centre |
| N81082 | City Walls Medical Centre |
| N81084 | Rope Green |

|  |  |
| --- | --- |
| N81085 | Park Lane House Medical Centre |
| N81086 | Wilmslow Health Centre |
| N81087 | Danebridge |
| N81088 | Park Green Surgery |
| N81090 | Tudors |
| N81092 | Hope Farm Medical Centre |
| N81093 | Whitby JS |
| N81100 | Upton Village Surgery |
| N81101 | Handbridge Medical Centre |
| N81102 | Hoole Road Surgery (Fountain) |
| N81111 | Merepark |
| N81113 | Middlewich Road |
| N81115 | Lache Health Centre |
| N81117 | Old Hall Surgery |
| N81118 | Meadowside Medical Centre |
| N81120 | Kelsall Surgery |
| N81121 | Northgate Village Surgery |
| N81123 | Willow Wood |
| N81125 | Neston Medical Centre |
| N81127 | Weavervale |
| N81607 | Westminster Surgery |
| N81614 | Wrenbury Surgery |
| N81624 | Rookery Surgery |
| N81626 | Western Avenue |
| N81632 | Broken Cross Surgery |
| N81642 | Watersedge MC |
| N81655 | St Werburghs Medical Practice |
| Y04664 | Willaston Surgery |
| **St Helens** |  |
| N83054 | Bethany Medical Centre |
| N83027 | Central Surgery |
| N83635 | Crossroads Surgery |
| N83624 | Dr Rahil Surgery |
| N83614 | Eccleston Medical Centre |

|  |  |
| --- | --- |
| N83008 | Ferguson Family Mp (Berrymead Medical Centre) |
| N83021 | Four Acre Surgery |
| Y00475 | Garswood Surgery |
| N83017 | Hall Street Medical Centre |
| N83020 | Haydock Medical Centre |
| N83049 | Kenneth Macrae Medical Centre |
| N83007 | Lingholme Hc |
| N83053 | Longton Medical Centre |
| N83005 | Vista Road Surgery |
| Y02510 | Marshalls Cross Mc |
| N83012 | Mill Street Medical Ctr |
| N83637 | Newholme Surgery |
| N83628 | Newton Community Hospital Practice |
| N83045 | Newton Medical Centre (Bridge St Surgery) |
| N83003 | Ormskirk House Surgery |
| N83023 | Atlas Medical Practice |
| N83026 | Parkfield Surgery |
| N83002 | Patterdale Lodge |
| N83006 | Phoenix Medical Centre |
| N83001 | Rainbow Medical Centre |
| N83041 | Rainford Health Centre |
| N83010 | Rainhill Village |
| N83620 | Sandfield Medical Centre |
| N83035 | Spinney Medical Centre |
| N83050 | The Bowery |
| N83054 | Bethany Medical Centre |
| N83027 | Central Surgery |

## ANNEX B – Data to be shared

The specific data items will only be coded (structured) data, that is to say no free text (unstructured) data. As noted in the section on access controls the data will be strictly governed as anonymised-aggregate, pseudonymised and only as person identifiable for the purpose of direct care. Additionally, for use cases beyond those given in this agreement there will be the additional governance of a Data Asset and Access Group (DAAG) to ensure full compliance with the parameters of this data sharing agreement

This Annex provides the categories of data to be shared from GP; Acute; Mental Health; Community; and Social Care (children and adult). The table incudes a brief description of the data categories and the use case(s) within which the data will be used for:

Use Case 1: Epidemiology Reporting

Use Case 2: Predicting outcomes and population stratification of vulnerable populations Use Case 3: For planning current services and understanding future service provision Use Case 4: For evaluation and understanding causality

# Social Care – Child

**NOTE**: no free text will be extracted. Only coded data.

|  |  |  |  |
| --- | --- | --- | --- |
| **Item (data spec doc cross****reference)** | **Field Name** | **Description** | **Use Case** |
| 1.1 | **Extract Identifier** | Reference data item | Reference data item |
| 1.2 | **Person Core** | Patient Identifiable Data | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only |
| 1.3 | **Person Extended** | Patient Identifiable Data | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only |
| 1.4 | **Referral** | **Open referrals** and **referrals** that have closed since a predefined number of months prior to go live of the export. | **Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 1.5 | **Event** | The data range of active events or which have an end date after the predefined number of months prior to go live of the export:* Assessment
* Meetings

**This does not include the free text associated with the event** | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 1.6 | **Alert** | **Alerts** of the following types that are still active or have an end date after the predefined number of months prior to go live of the export:* Child Protection
* Child in Need
* Child Looked After
* Missing Person
* Hazard
* MARAC
 | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 4:** Evaluation and Causality**Proposal: due to sensitive nature of codes this category may be excluded from the extract** |
| 1.7 | **Disability** | **Disabilities** that are still active or have an end date after the predefined number of months prior to go live of the export. | **Use Case 1:** Epidemiology**Use Case 2:** Predicting Outcomes and Population |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  | Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 1.8 | **Related Person** | **Relationship Types** and**Relationship Flags** | **Use Case 2:** Predicting Outcomes and PopulationStratification. Re-id for direct care purposes only |
| 1.9 | **Practitioner (staff type)** | Only those **Practitioner** involvements that are still active or have an end date after thepredefined number of months prior to go live of the export. | **Use Case 3:** Planning and Future Service Provision |
| 1.10 | **Classification** | **Primary Support Reasons** that are still active or have an end date after the predefined number of months prior to go live of the export: may include:* Physical support – Access and mobility
* Social support – Substance misuse
* Sensory support
* Mental Health support
* Learning Disability support
 | **Use Case 1:** Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |

# Social Care – Adult

|  |  |  |  |
| --- | --- | --- | --- |
| **Item** | **Field Name** | **Description** | **Use Case** |
| 2.1 | **Extract Identifier** | Reference Data Item | Reference Data Item |
| 2.2 | **Person Core** | Patient Identifiable Data | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only |
| 2.3 | **Person Extended** | Patient Identifiable Data | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only |
| 2.4 | **Referral** | **Open referrals** and **referrals** that have closed since a predefined number of months prior to go live of the export. | **Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 2.5 | **Event** | Consider the data range of active events or which have an end date after the predefined number of months prior to go live of the export:* Assessment
* Safeguarding
* Organisational Safeguarding Case
* Deprivation of Liberty Safeguards (DOLS)
 | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 2.6 | **Alert** | **Alerts** that are still active or have an end date after the predefined number of months prior to go live of the export.* Risks
* Special Factors
 | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 4:** Evaluation and Causality**Proposal: due to sensitive nature of codes this category may be excluded from the extract** |
| 2.7 | **Disability** | **Disabilities** that are still active or have an end date after the predefined number of months prior to go live of the export. | **Use Case 1:** Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  | **Use Case 4:** Evaluation and Causality |
| 2.8 | **Related Person** | **Relationship Types** and**Relationship Flags** | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for directcare purposes only |
| 2.9 | **Practitioner (staff type)** | Only those **Practitioner** involvements that are still active or have an enddate after the predefined number of months prior to go live of the export. | **Use Case 3:** Planning and Future Service Provision |
| 2.10 | **Classification** | **Primary Support Reasons** that are still active or have an end date after the predefined number of months prior to go live of the export: may include:* Physical support – Access and mobility
* Social support – Substance misuse
* Sensory support
* Mental Health support
* Learning Disability support
 | **Use Case 1:** Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 2.11 | **Care Plan** | Care plans linked to referrals that have been exported in the Referral data file that are still active or have an end date after the predefined number of months prior to go live of the export. | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 2.12 | **Service Provision** | All service provisions linked to care plans that have been exported in the Care Plan data file should be included. Those that are still active or have an end date after the predefined number of months prior to go live of the export should be exported. | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 2.13 | **Care Plan Need and Outcome** | All needs and outcomes linked to care plans and service provisions that have been exported in the Care Plan data file. | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |

# Acute

|  |  |  |  |
| --- | --- | --- | --- |
| **Item** | **Field Name** | **Description** | **Use Case** |
| 3.1 | **Demographics** | Data items supported as part of the MPI Load.* Surname
* NHS Number (and validation status)
* DOB
* Sex
* Address
* Postcode
* Death Status and Death Date
* Ethnic Group
 | **Use Case 1:**Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only |
| 3.2 | **Medications** |  | **Use Case 1:**Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 3.3 | **In-Patient** | Unique Identifier (Event ID) Admission Date Stay TypeWard SpecialtyAdmission Type Admission Category Admission Source Diagnosis | Consultant Admitting Doctor Attending Doctor Transfer Date Transfer Reason Discharge Date Discharge Method Discharge Destination Procedures | **Use Case 1:**Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 3.4 | **Out-Patient** | Unique Identifier (Event ID) Originating Referral ID Referral DateReferral Outcome Referral Priority | Referral Disposition Referral Type Referral Category Speciality | **Use Case 1:**Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  | Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 3.5 | **A&E** | Unique Identifier (Event ID) Attendance Date Discharge Date Discharge Method Diagnosis | Discharge Destination Location Consultant Referring Doctor Procedures | **Use Case 1:**Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only |
|  |  |  |  | **Use Case 3:** Planning and Future Service Provision |
|  |  |  |  | **Use Case 4:** Evaluation and Causality |
| 3.6 | **ICE/PathologyResults** | Pathology Results Direct from Labs or from the ICE system | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only |
|  |  |  | **Use Case 4:** Evaluation and Causality |

* 1. **Community (Individual Spec document for each item)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Item** | **Field Name** | **Description** | **Use Case** |
| 4.1 | **Demographics** | Data from the demographics CSV will be used for creating or updating the demographics of a patients. | **Use Case 1:** Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only |
| 4.2 | **Referral** |  | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 4.3 | **Alerts** | When providing Alert information, each message will need to contain all the current available Alerts for a patient i.e. the file would not be expected to contain historic alerts (inactive/ended) | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 4:** Evaluation and Causality**Proposal: due to sensitive nature of codes this category may be excluded from the extract** |
| 4.4 | **Community Health** | * Immunisations
* Care Plan
* Problems
* Interventions
* Encounters & Appointments
* Diagnosis
* Medications
 | **Use Case 1:** Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 4.5 | **Allergies** |  |  |
| 4.6 | **Contacts** |  | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |

* 1. **Mental Health (Individual Spec document for each item)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Item** | **Field Name** | **Description** | **Use Case** |
| 5.1 | **Demographics** | Data from the demographics CSV will be used for creating or updating the demographics of a patients. | **Use Case 1:** Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only |
| 5.2 | **Referral** |  | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 5.3 | **Alerts** | When providing Alert information, each message will need to contain all the current available Alerts for a patient i.e. the file would not be expected to contain historic alerts (inactive/ended) | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 4:** Evaluation and Causality**Proposal: due to sensitive nature of codes this category may be excluded from the extract** |
| 5.5 | **Care Programme Approach (CPA)** | * Diagnosis
* Mental Health Act
* Risk Assessment
* Risk Scores
* Risk Plans
* Early Intervention in Psychosis (EIP)

**Free text will not be included.** | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 5.6 | **Contacts** |  | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision **Use Case 4:** Evaluation andCausality |

* 1. **General Practice**

|  |  |  |  |
| --- | --- | --- | --- |
| **Item** | **Field Name** | **Description** | **Use Case** |
| 6.1 | **GP COVID-****19/Advance Care Planning** | * GP COVID-19 Status
* GP Advance Care Planning
* Alerts
 | **Use Case 1:** Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 6.2 | **Allergies Summary** |  |  |
| 6.3 | **GP Medications Issued** |  | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 6.4 | **GP Repeat Medications** |  | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 6.5 | **GP Problems** | * Active Problems
* Past Problems
* Additional Problems
 | **Use Case 1:** Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |

|  |  |  |  |
| --- | --- | --- | --- |
| 6.6 | **GP Results** |  | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 6.7 | **GP Vitals and Measurements** | Latest height/weight; latest blood pressure; latest physiological function result ordered by date descending. | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 6.8 | **GP Lifestyle** |  | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 6.9 | **Additional GP Information** | * GP Encounter
* Vaccinations & Immunisations
* Contraindications
* OTC and Prophylactic Therapy
* Family History
* Child Health
* Diabetes Diagnosis
* Chronic Disease Monitoring
* Medication Administration
* Pregnancy, Birth and Post Natal
* Contraception and HRT
* GP Imaging
* Other Investigations
* Investigations Administration
* Operations
* Obstetric Procedures
* Other Diagnostic Procedures
* ECG
 | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | * Other Preventative Procedures
* Other Therapeutic Procedures
* Recent Test Results (last 12 months)
 |  |
| 6.10 | **Data Categories** | * Active Problems
* Administration
* Alcohol Exercise and Diet
* Allergy
* Blood Chemistry
* Blood Pressure
* Cervical Cytology
* Child Health
* Chronic Disease Monitoring
* Contraception and HRT
* Contraindications
* Diabetes Diagnosis
* ECG Pulmonary
* Encounters
* Family History
* Full Problems List
* Glucose/hba1c
* Haematology
* Height and Weight
* Imaging
* Investigations Admin
* Medications Administration
* Medication Issues
* Microbiology
* Obstetric Procedures
* Operations
* OTC Prophylactic Therapy
* Other Cytology/Pathology
* Other Diagnostic Procedures
* Other Investigations
* Other Preventative Procedures
* Other Therapeutic Procedures
* Past Problems
* Physiology Function Tests
* Pregnancy, Birth and Post Natal
* Recent Tests
* Referrals and Admissions
* Repeat Medication
* Smoking
* Social History
* Unmatched
* Urinalysis
* Vaccination and Immunisations
 | **Use Case 1:** Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |

* 1. **General Practice - TPP**

|  |  |  |  |
| --- | --- | --- | --- |
| **Item** | **Field Name** | **Description** | **Use Case** |
| 7.1 | **Medications** | * Repeat Medications
* Medications Issued
 | **Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |
| 7.2 | **GP Problems** | * Active Problems
* Past Problems
* Additional Problems
* GP Results
* GP Lifestyle
* Blood Pressure
* Additional GP Information
* GP Encounters/Administration
* GP Encounters
* GP Administration
* Referrals
* Radiology
* Operations
* Investigations
* Contraception and HRT
* Pregnancy, Birth & Post Natal
* GP Family History
* Contraindications
* Vaccinations and Immunisations
 | **Use Case 1:** Epidemiology**Use Case 2:** Predicting Outcomes and Population Stratification. Re-id for direct care purposes only**Use Case 3:** Planning and Future Service Provision**Use Case 4:** Evaluation and Causality |