

Risk Stratification

<p>Purpose</p>	<p>Information from health and social care records, using the NHS Number provided via the Secondary Uses Service (SUS) at NHS Digital, is analysed to identify groups of patients who would benefit from additional help from their GP or care team. This is known as ‘Risk Stratification’- a tool for identifying and predicting which patients are at high risk, or are likely to be at high risk and prioritising the management of their care in order to prevent worse outcomes.</p> <p>To conduct risk stratification Secondary User Services (SUS+) data, identifiable at the level of NHS number is linked with Primary Care data (from GPs) and an algorithm is applied to produce risk scores. Risk Stratification provides a forecast of future demand by identifying high risk patients. Commissioners can then prepare plans for patients who may require high levels of care.</p> <p>Risk Stratification also enables General Practitioners (GPs) to better target intervention in Primary Care</p> <p>Data is passed to the Data Services for Commissioners Regional Office (DSCRO) so that the information can be linked.</p> <p>De-identified information is made available to the CCGs to:</p> <ul style="list-style-type: none"> • provide a picture of the health and needs of their local population, which enables: • priorities to be determined in the management and use of resources; • planning services; cover the range of potential questions, and • issues they may need to consider • support and evidence decisions
<p>Type of information Used</p>	<p>Only de-identified information (NHS number removed) is accessible to the CCGs. Only GP Practices within the CCGs have access to identifiable information (NHS Number) of their own patients in order to see who may benefit from additional help</p>
<p>Legal basis</p>	<p>The lawful basis for processing this data are:</p> <p>GDPR Article 6(1)(e) – processing is necessary for the performance of a task carried out in the exercise of official authority vested in the controller.</p> <p>GDPR Article 9(2)(h) processing is necessary for the purposes of the provision of health or social care or treatment or the management of health or social care systems and services.</p> <p>A section 251 approval (CAG 7-04(a)/2013) from the Secretary of State, through the Confidentiality Advisory Group of the Health Research Authority, enables the pseudonymised</p>

	information to be sent to the CCGs via NHS Digital in order to help us plan the most appropriate health services for our population.
How we collect (the source) and use the information	<p>The CCGs commission services from a range of providers covering a wide array of services. Each of the data flow categories requested supports the commissioned activity of one or more providers.</p> <p>The following pseudonymised datasets are required to provide intelligence to support commissioning of health services:</p> <ul style="list-style-type: none"> - Secondary Uses Service (SUS+) - Local Provider Flows <ul style="list-style-type: none"> o Acute o Ambulance o Community o Demand for Service o Diagnostic Service o Emergency Care o Experience, Quality and Outcomes o Mental Health o Population Data o Primary Care Services o Public Health Screening
Data Processors	<p>Data Services for Commissioners Regional Office (DSCRO)</p> <p>North of England Commissioning Support (NECS)</p> <p>Leeds City Council Health and Care Hub</p>
How long we will keep the information	<p>The data will be retained in line with the law and national guidance.</p> <p>https://digital.nhs.uk/article/1202/Records-Management-Code-of-Practice-for-Health-and-Social-Care-2016</p>
Who we will share the information with (recipients)	<p>This information is not shared outside the CCG and member practices.</p>