**Use Case Template Document**

**Use Case Name:**

Triaged by Clinical Assessment Service clinician after referral to Single Point of Access for Mental Health

**Brief Description:**

A patient is referred via Single Point of Access (SPA) and it has not been indicated which service is required, then the referral is passed to the Clinical Assessment Service (CAS) team to triage.

The CAS clinician triaging the referral will have full access to the patient’s GP record to ensure that the referral is directed to the correct Mental Health service.

**Use Case Justification:**

Clinical and Administration:

* Access to accurate information at the point of care reducing the opportunity for errors to occur.
* Reduction in clinical time wasted, away from the patient, collecting and collating information.
* Reduction in clinical time wasted, away from the patient, manually updating IT systems.
* Reducing the paper flow through departments/organisations by utilising the systems workflow to manage tasks using staff time efficiently.

Patient Focused:

* Security of patient information is maintained and improved through the reduction of paper-based “Patient Identifiable Documents” in use within departments.
* Increased patient / clinician time due to reduction in clinician time spent collecting and transcribing information away from the patient.
* Increased patient safety due to the reduction in manual transcription errors.
* Better patient experience as they are not being asked for information which should already be available to the clinician.

**Primary Actors:**

CAS Team

PARIS System

GP Connect

GP Clinical System.

**Secondary Actors:**

Patient

**Triggers:**

Patient is referred to Mental health services using the Single Point of Access services, a service is not identified.

**Pre-Conditions:**

* The patient’s details have been verified and entered on the PARIS system.
* CAS staff have the correct / appropriate system access rights.
* The patient’s GP has agreed to share patient information via GP Connect.
* The patient allows this shared information to be viewed / used by GP staff.
* Electronic Interactions between PARIS system / GP Connect / GP Clinical System have been correctly configured.

**Post Conditions:**

* **On Success:**
* **Guaranteed:**
  + All the relevant available information on the patient’s medical history has been viewable on the PARIS system used by the CAS team to triage the referral to the correct service.

**Basic Flow with Alternative and Exception Flows:**

*{The basic flow is the best case scenario (i.e. the happy path) of what should happen in the use case if all the conditions are met. Describe other allowed variations of the basic flow. Are the any alternate routes that can be taken? Describe Error Conditions or what happens when a failure occurs in the flow}*

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| Step 1 | Patient is referred to mental health via the Single point of access process |
| Step 2 | No specific service is identified by the referrer |
| Step 3 | Referral is passed onto CAS to triage |
| Step 4 | The CAS clinician logs into their usual system |
| Step 5 | CAS clinician searches for patient via NHS number |
| Step 6 | The PARIS system will request the patient’s relevant sections of the patient’s record that are held in the patients registered GP Practice system via the GP Connect Service |
| Step 7 | GP Connect and the GP Practice system will check that the CAS organisation is allowed access to the data and that the patient has not objected to their data being shared. |
| Step 8 | GP Clinical System provides all relevant requested sections including:   * Medication   + Current and historic   + Reasons for being given medication   + Anti-depressants that patient is on / has been on   + Encounters and Conditions linked to medications (to understand if patient condition has improved since taking the anti-depressant)   Other items   * Reports for:   + Bloods, urine, ECG, CT scans, etc * BMI (observations) * Physical Health Checks * A&E admissions * Problems/Diagnosis   + Long standing conditions   + History of mental health * Encounters - Is the patient’s GP aware of their condition? * Demographics   + Name, DOB Address, Current address if different NHS number Language preferred, Gender, Ethnicity, contact number, Communication requirements   + Next of kin details   + GP details including address and contact number * Referral description (GP summary)   **Out of scope**   * Case notes from previous interactions with Leeds Partnership Trust (from the PARIS system) * How is patient being managed in the community |
| Step 9 | The PARIS system imports the all information supplied from the GP practice. This data is now available for clinicians to review and maintain. |
| Step 10 | The medical data retrieved by the CAS clinician from other sources is manually added to the community system. |
| **Alternative Path** | |
| Step 7a | Where there are not the appropriate permissions to share the data, GP connect returns an error message saying the information cannot be returned.  The CAS clinician will retrieve the information using the SCR, Leeds Care Record and direct requests to the GP practice. They will then manually enter the data. |