Digital Health Tools & Clinical Decision Making

**TA5:** Appraise the regulations concerning the collection and ownership of data in digital health tools used by patients and clinicians

## Activity

### Part 1 – background information

* Summarise the regulations concerning the collection and ownership of data in digital health tools used by patients and clinicians *(- feel free to expand this table if required).*

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| **Part A:** Please answer the following questions | |
| **What is patient consent and why is it important?** | Patient consent means the patient agrees to their information being used. It's important because it respects the patient's rights and keeps trust between them and the healthcare team. |
| **What is confidentiality and why is it important?** | Confidentiality means keeping patient information private. It's important so patients feel safe sharing personal info, which helps them get better care. |
| **What are the Caldicott principles are why were they written?** | These are 7 rules to make sure patient data is only shared when needed and used properly. They were made to protect privacy and keep data safe in health and care services. |
| **What is IG and why is it important?** | IG is the way organisations make sure they collect, store, and share data safely and legally. It’s important to protect patients and keep trust in the healthcare system. |
| **What is a DPIA and why are they important?** | A DPIA checks if a new project or tool could harm people’s privacy. It helps find and fix risks early, so patient data stays safe. |
| **What is GDPR and why is it of relevance in healthcare?** | GDPR is a law that controls how personal data is used. In healthcare, it makes sure patient information is handled fairly, safely and only when really needed. |
| **Who owns patient healthcare date and who has the right to access it?** | The data belongs to the patient, but healthcare providers (like the NHS) hold it and are responsible for keeping it safe. Only people involved in care or those with permission can access it. |

### Part 2 – The local DPIA process.

#### Useful Resources:

* [RGU\_Genetic\_Laboratory - DPIA - All Documents](https://nhs.sharepoint.com/sites/RQ3_BWC_RGU_Genetic_Laboratory/Quality/Forms/AllItems.aspx?csf=1&web=1&e=qVmyAx&CID=cfc9d0ac%2D84b5%2D4b52%2Dbe67%2D347c2ed0b3a7&FolderCTID=0x012000F8FAD37517B02E478457D49080ABDCB8&id=%2Fsites%2FRQ3%5FBWC%5FRGU%5FGenetic%5FLaboratory%2FQuality%2FDPIA&viewid=8f093368%2D358d%2D4efb%2Da6fc%2D33422c1ae504)
* [RGU\_Genetic\_Laboratory - DPIA process, guides, templates - All Documents](https://nhs.sharepoint.com/sites/RQ3_BWC_RGU_Genetic_Laboratory/Quality/Forms/AllItems.aspx?csf=1&web=1&e=qVmyAx&CID=cfc9d0ac%2D84b5%2D4b52%2Dbe67%2D347c2ed0b3a7&FolderCTID=0x012000F8FAD37517B02E478457D49080ABDCB8&id=%2Fsites%2FRQ3%5FBWC%5FRGU%5FGenetic%5FLaboratory%2FQuality%2FDPIA%2FDPIA%20process%2C%20guides%2C%20templates&viewid=8f093368%2D358d%2D4efb%2Da6fc%2D33422c1ae504)
* Existing DPIAs can be found on the change app/links above.

#### Write a short SOP for the local DPIA process

(i.e. summarise the local DPIA process).

* Include a Flow chart for local DPIA procedure (see SharePoint)
* SharePoint links etc.
* FAQ e.g.
  + does an existing DPIA exist – all DPIA’s are stored [RGU\_Genetic\_Laboratory - DPIA - All Documents](https://nhs.sharepoint.com/sites/RQ3_BWC_RGU_Genetic_Laboratory/Quality/Forms/AllItems.aspx?csf=1&web=1&e=qVmyAx&CID=cfc9d0ac%2D84b5%2D4b52%2Dbe67%2D347c2ed0b3a7&FolderCTID=0x012000F8FAD37517B02E478457D49080ABDCB8&id=%2Fsites%2FRQ3%5FBWC%5FRGU%5FGenetic%5FLaboratory%2FQuality%2FDPIA&viewid=8f093368%2D358d%2D4efb%2Da6fc%2D33422c1ae504) please check if there is an existing DPIA approved or in progress.
  + Is a DPIA required?
* Must be accessible to a non-bioinformatics audience.
* When is a DPIA required?
* How to complete a DPIA

### Part 3 – Map the local DPIA procedure against guidelines/regulations.

* Does our local DPIA procedure follow the regulations reviewed in part 1?
* Are there any gaps?
* Can you suggest any improvements to the process?

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| **Part B:** Please complete during the TA | |
| **What have you learned from so far during the task?** | I was not previously aware of the DPIA process within the department and what it entails. I now understand it is an important and structured process in order to always handle patient data safely. |
| **How will you apply what you have learned to your future clinical practice?** | As I am part of the Informatics team, I could potentially be handling DPIA requests myself in my future practice. I hope to make it an easy process for colleagues and encourage early conversations. |
| **Any other reflections?** |  |

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| **Part C:** Please complete at the end of the TA | |
| **What have you learned from completing this task?** | Completing this task has helped me understand the DPIA process much more deeply, not just in terms of the steps involved, but also how it fits into wider Trust governance and clinical safety. I’ve also seen how important it is to present complex processes like DPIAs in a clear, accessible way, especially for clinical and project staff who may not be familiar with IG or data protection. Working with flowcharts, templates, and guidance documents has shown me how essential it is to link policy with practical, everyday tools that staff can actually use. |
| **How will you apply what you have learned to your future clinical practice?** | In my role within the IG team, I’ll use this learning to improve how I support others through the DPIA process. I’ll focus on offering clear, early guidance to clinical teams. I also want to be more involved with these processes from an Informatics perspective as going forward I may be able to help with some of these decisions and so should understand how they are made. |
| **Any other reflections?** | This task has also shown me how important good cross-team communication is, between IG, clinical leads, and external suppliers. |
| **Action Plan:** Has this TA identified any knowledge/skills gaps that you feel you need addressing. If so, what is your plan to address these gaps? | * **Better knowledge of clinical workflows**: Understanding the clinical side helps ensure DPIA advice is relevant and realistic. * **More confidence with data flow mapping**: I’d like to practise using tools to visualise how data moves between systems and organisations. * **Improved communication skills for non-technical audiences**: I want to get better at explaining IG concepts in a way that’s easy to understand.   **Plan to address these gaps:**   * Shadow clinical staff during a project planning meeting to better understand their priorities. * Attend training or request a session on data flow mapping and visual tools. * Practise creating plain-language DPIA guidance and get feedback from a non-IG colleague. |