



Programme Care Management Modules

A range of Programme Management Modules are available within CDRIntell to support population-based interventions.

Each module allows General Practices to review patients who have been identified as being potentially suitable for the intervention specified. Patients will then receive an invitation to participate in the specific initiative.

Each module will:

- Generate all correspondence, track the patient through their invitation, attendance and capture outcomes.
- Handle all exceptions associated with these programmes e.g. returned undelivered correspondence, patients who did not attend, etc.
- Allow all relevant healthcare professionals to review the status of their patients within the initiative and provides process and outcomes reporting.

Programme Management Modules Available

CVD Primary Prevention Module

Supports the identification of patients who would benefit from a CVD Health Check and enables an *industrial scale* intervention to be planned, operated and evaluated. Interventions, Gaps and Outcomes are also presented.

CVD Secondary Prevention Module

This module identifies all patients with a CVD or related Diagnosis and supports the scheduling of their annual reviews. The module supports the generation of invitations, reminders and handles all exemptions. It also provides process and outcomes reports and enables the PCT to monitor the quality of care being delivered to patients against NSF and latest guidance.

Childhood Vaccination and Immunisation Module

This comprehensive module organises the entire Childhood Vaccination and Immunisation Programme. Having exported details of the consent and vaccines given by General Practice, the programme module supports the invitation of patients. The vaccination status of the patient is maintained and is available for all users. The Childhood Administration Department may generate letters (invitations and reminders) produce Gap and Cover Reports and run Catch-up campaigns.

Referral and Intervention Management Module

Focuses on referrals made by General Practice to the Hospital Sector. Referrals may use Choose & Book, they may also be made directly or via a Referral Management Centre or similar. The eighteen-week wait initiative makes it more important than ever, to establish an early position on referral demand. This is important to understand at all levels: Practice, PBC Group and PCT. This application links the referral to the corresponding hospital episode(s) of care (as detailed in the commissioning dataset provided by the Secondary Uses Service and supports an understand of outcomes and allows hospital invoices to be validated. Exceptions are highlighted and a range of reports provided in support of PBC and PCT users.

Population Based Risk Stratification Module

This module supports the allocation of patients, at each Risk Tier to a range of interventions to support their care. Essentially the solution allows the systematic assessment of patients by risk and proposes the efficient referral (with supporting rationale) to the PCT's range of interventions. For example, those confirmed at Case Management level, may be suitable for referral to a community matron; where they are on five or more medications they may be referred for a medicines management review; and where they smoke they may be referred to smoking cessation. All of these decisions and processes are supported within this population based intervention management solution.

Diabetic Retinopathy Screening

Comprehensive DRS service to identify, screen and monitor diabetic patients at risk of retinopathy. In addition to a fully managed service, we can offer retinal screening resources tailored to meet specific requirements that will integrate with existing programmes. Our service can be deployed rapidly, being operational within just a few weeks of being commissioned.