

# Supporting Practices with Information Sharing

Julie Irving – Information Sharing Programme Manager

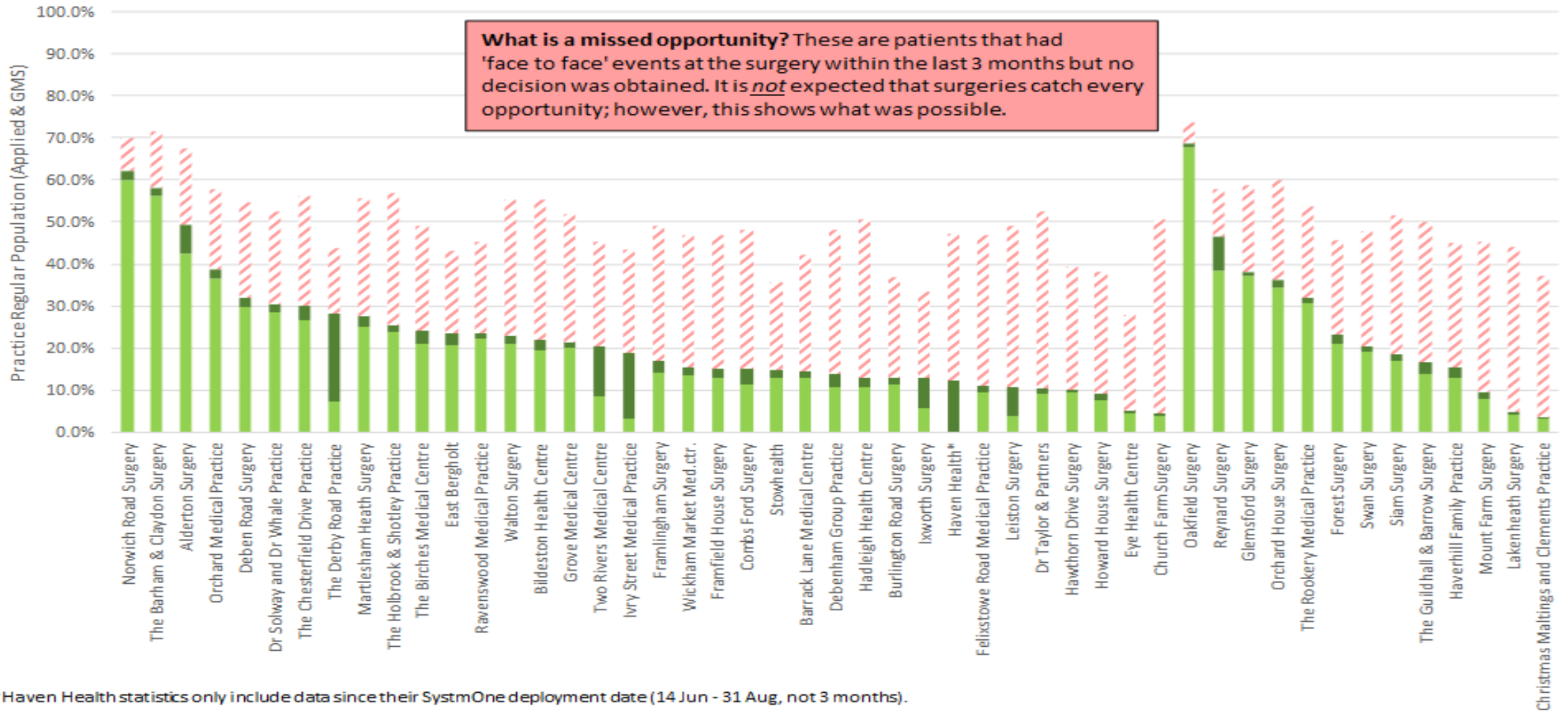
[Julie.irving@suffolk.nhs.uk](mailto:Julie.irving@suffolk.nhs.uk)

# Myth-busting.....

- “Once I turn on explicit consent to share for a patient – anyone with a Smartcard and SystemOne access can view that patient’s record”
- FALSE
- “Practices are liable for misuse of the patient’s record by another service”
- FALSE
- “If the CCG would just implement one technology solution this wouldn’t be a problem”
- FALSE

# Suffolk Position – we can do better

% of GP Regular patients with a SystmOne Record Sharing Decision + Recent Progress & Missed Opportunities (1 Sep 2017)  
 Greenbar (Light & Dark) = Total decisions. Dark green = Progress in last 3 months. Striped Red = Missed opportunities.



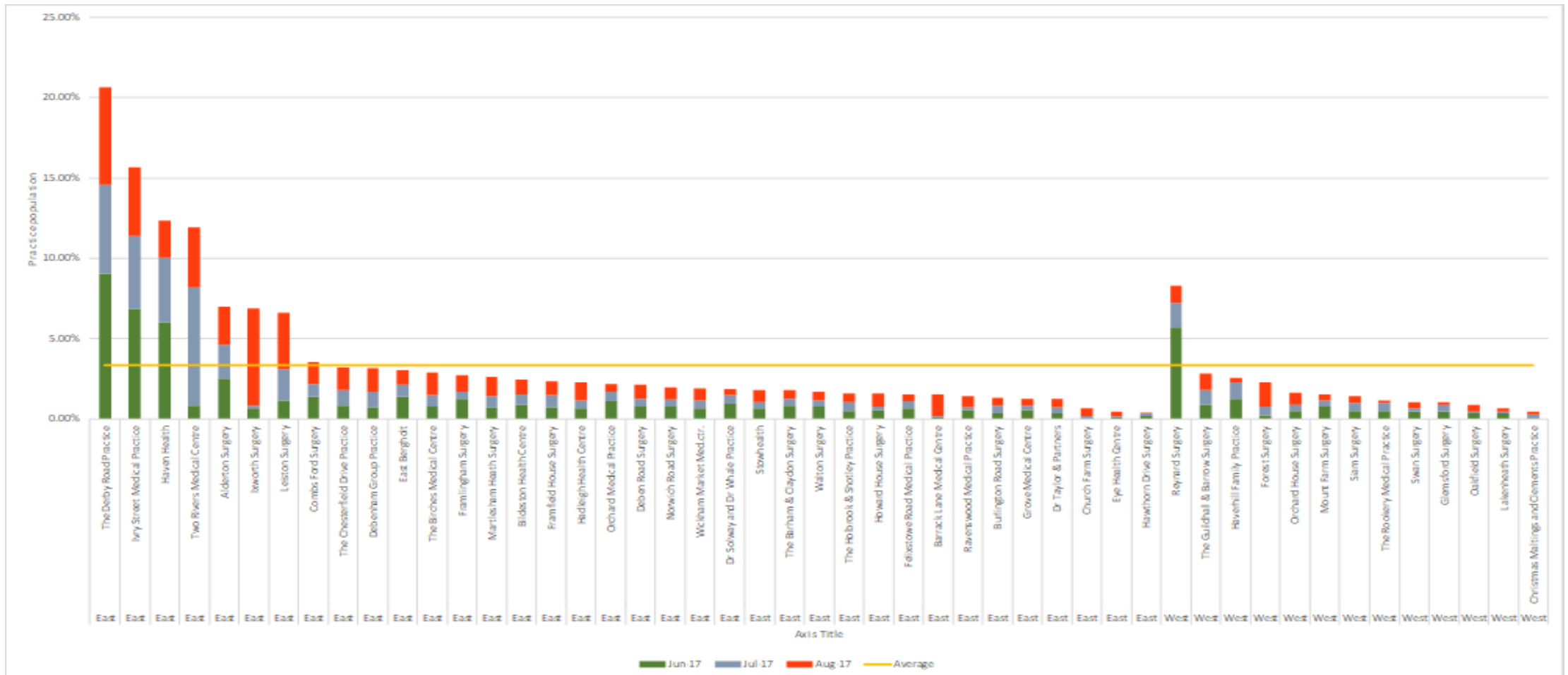
\*Haven Health statistics only include data since their SystmOne deployment date (14 Jun - 31 Aug, not 3 months).

# Suffolk Position – we can do better

## Improvement in last 3 months

Yellow bar indicates Suffolk average improvement last month.

This chart does not show if decisions are Yes/No; however ratio remains consistent with under 2% of patients declining record share out.



# Patient Decisions

- New form – two questions on one form – no system bias
- Making it work for your practice:
  - Derby Road
  - Haven Health
  - Flu clinics
  - Turn on ‘Record Sharing Prompt’ within SystemOne
  - Ixworth / Fressingfield – trialled form in draft format
  - Easy Read version available



## Who can see my health record?

To treat you safely and well, it is important that professionals you see can access your health record.

Only by letting your GP surgery know it is ok will your notes be available to be seen by other professionals such as hospital clinicians, paramedics or district nurses.

### How do I make my record available to health professionals?

Simple. Complete this form and hand it into your GP surgery. There are two ways that this sharing can happen and it's important you understand what they are so you can make the right decision for you.

<b>A. Summary Care Record with Additional Information</b>	
A Summary Care Record has basic information on that is useful for NHS clinicians. It shows if you have allergies and it lists your medications. 98% of people have this. By including "Additional Information", this will add your illnesses and any health problems, vaccinations, operations and information on how you would like to be treated.	
<b>B. Full Electronic Health Record</b>	
Your full electronic health record is held by your GP surgery. It can also be made available to health and social care staff, if they are involved in your direct care. <b>Staff must still ask for your permission before they look at your record.</b> This also allows your surgery to see what other staff are doing to support and treat you. If there are certain parts of your record that you wish to keep private, your surgery can do this.	

### Does this mean anyone can just look at my record?

**No.** Your record can only be seen by staff who are **currently involved in your direct care, have a need to see it, and have asked for your permission.** The only exception to this is in case of an emergency. For instance, if you were taken to hospital unconscious, a doctor could look at your record without your permission. If this happens, a permanent alert is created showing who looked at the record and why.

### Are you going to sell the information in my record?

**No.** Information that is shared when you complete this form is only ever available to staff for the purposes of your care, nothing else.

### Can I change my mind?

**Yes.** Just tell your surgery and they can update your decision at any time.

### Your decision to agree to either one, or both

<b>A</b>	Yes, I am happy for additional information to be added to my Summary Care Record, this means healthcare staff treating me can see a summary of my medical history in addition to my medication and allergies*.		Please Tick
<b>B</b>	Yes, I am happy for my full health record to be shared by my GP surgery. This will be available to health and social care professionals who are currently treating me, and have my permission to view it.		

\*If you already have a basic summary care record and now wish to opt out of this completely, please ask your practice for an SCR consent form.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

If you are filling in this form on behalf of another person, please ensure that you fill in their details above; you sign the form above and provide your details below:

Name: \_\_\_\_\_  Parent  Legal Guardian  Lasting power of attorney

*For more information about the Summary Care Record and health record sharing, please refer to [www.bit.ly/whocanseemyrecord](http://www.bit.ly/whocanseemyrecord) or call PALS on 0800 389 6819.*

Information for GP Practices	
<b>A</b>	To opt patient in to SCR with Additional Information, add read code <del>XaXbZ</del> (SystemOne) or 9Ndn (EMIS)
<b>B</b>	For health record sharing: In SystemOne, choose "Record Sharing" and then "Yes" and "Consent given". In EMIS Web, choose "Sharing" from the Care History tab, "EMIS Sharing Consent" and choose "Patient Consents".

# Questions