

**Plain English explanation**

The Summary Care Record is an English NHS development. It consists of a basic medical record held on a central government database on every patient registered with a GP surgery in England. The basic data is automatically extracted from your GP’s electronic record system and uploaded to the central system GPs are required by their contract with the NHS to allow this upload. The basic upload consists of current medication, allergies and details of any previous bad reactions to medicines, the name, address, date of birth and NHS number of the patient

As well as this basic record additional information can be added, and this can be far reaching and detailed. However, whereas the basic data is uploaded automatically any additional data will only be uploaded if you specifically request it and with your consent.

Summary Care Records can only be viewed within the NHS on NHS smartcard controlled screens or by organisation, such as pharmacies, contracted to the NHS.

You can find out more about the SCR here <https://digital.nhs.uk/summary-care-records>

You have the right to object to our sharing your data in these circumstances and you can ask your GP to block uploads.

We are required by Articles in the General Data Protection Regulations to provide you with the information in the following 9 subsections.

1) Data Controller contact details	Arch Healthcare School Clinic, Morley Street, Brighton BN2 9DH 01273 003930
2) Data Protection Officer contact details	Trudy Slade School Clinic, Morley Street, Brighton BN2 9DH 01273 003930 Contact form via http://www.archhealthcare.uk
3) Purpose of the processing	Upload of basic and detailed additional SCR data
4) Lawful basis for processing	The processing of personal data in the delivery of direct care and for providers’ administrative purposes in this surgery and in support of direct care elsewhere is supported under the following Article 6 and 9 conditions of the GDPR: <i>Article 6(1)(e) ‘...necessary for the performance of a task carried out in the public interest or in the exercise of official authority...’.</i> <i>Article 9(2)(h) ‘necessary for the purposes of preventative or occupational medicine for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care systems and services...’</i> We will also recognise your rights established under UK case law collectively known as the “Common Law Duty of Confidentiality”*
5) Recipient or categories of	The data will be shared with Health and care professionals and support



Privacy Notice – Summary Care Record

recipients of the processed data	staff in this surgery and at hospitals, diagnostic and treatment centres who contribute to your personal care. [if possible list actual named sites such as local hospital)(s) name]
6) Rights to object	You have the right to object to some or all the information being processed under Article 21. Please contact the Data Controller or the practice. You should be aware that this is a right to raise an objection, that is not the same as having an absolute right to have your wishes granted in every circumstance
7) Right to access and correct	You have the right to access the data that is being shared and have any inaccuracies corrected. There is no right to have accurate medical records deleted except when ordered by a court of Law.
8) Retention period	The data will be retained in line with the law and national guidance. https://digital.nhs.uk/article/1202/Records-Management-Code-of-Practice-for-Health-and-Social-Care-2016 or speak to the practice.
9) Right to Complain.	You have the right to complain to the Information Commissioner’s Office, you can use this link https://ico.org.uk/global/contact-us/ or calling their helpline Tel: 0303 123 1113 (local rate) or 01625 545 745 (national rate) There are National Offices for Scotland, Northern Ireland and Wales, (see ICO website)

* “Common Law Duty of Confidentiality”, common law is not written out in one document like an Act of Parliament. It is a form of law based on previous court cases decided by judges; hence, it is also referred to as 'judge-made' or case law. The law is applied by reference to those previous cases, so common law is also said to be based on precedent.

The general position is that if information is given in circumstances where it is expected that a duty of confidence applies, that information cannot normally be disclosed without the information provider's consent.

In practice, this means that all patient information, whether held on paper, computer, visually or audio recorded, or held in the memory of the professional, must not normally be disclosed without the consent of the patient. It is irrelevant how old the patient is or what the state of their mental health is; the duty still applies.

Three circumstances making disclosure of confidential information lawful are:

- where the individual to whom the information relates has consented;
- where disclosure is in the public interest; and
- where there is a legal duty to do so, for example a court order.

PATIENT INFORMATION SHARING AND CONSENT: *Guidance for GP practices*

BH CCG June 2014

This has been produced to help clarify the different types and purposes of current patient information sharing that is relevant to GP practices and their patients.

SUMMARY CARE RECORD (SCR)

For direct patient care in an emergency situation or where access to detailed records is not available



An electronic record that is available nationally which contains information about a patient's medication, allergies and adverse reactions.

Consent Model¹: Opt-out

When a practice initially goes live with SCR, implied consent is automatically recorded unless the patient has opted-out. However practices should ask all newly registered patients for their express consent / dissent.

What are the two levels of SCR and what does this mean for consent?

1. **Core:** this is the standard SCR which is created automatically and includes medications, allergies and adverse reactions
2. **Additional Information:** Further information is added to the core SCR on a patient-by-patient basis. Express consent is required.

How do I record patient consent preference?

Live practices should use consent screens within the clinical system. If a practice is not yet live with SCR the following Read Codes should be used:

- Express consent for core SCR only: **9Ndm.** or **XaXbY**
- Express consent for additional information: **9Ndn.** or **XaXbZ**
- Express dissent (opt out): **9Ndo.** or **XaXj6**
- Implied consent: **9Ndl.** or **XaXbX**

¹ Refers to consent for the practice to create an SCR for the patient

DETAILED RECORDS SHARING

For patient planned or unscheduled care

Clinicians outside the GP practice can view either the whole record or elements of the record, and also add information to it.

Consent Model: Opt-in

Each patient must be asked for their express consent to share with other clinicians treating them.

What are the two different models and systems used to enable detailed records sharing?

1. **Enhanced Data Sharing Model (EDSM)** is the TPP SystemOne models – "one patient, one record"
2. The **Medical Interoperability Gateway (MIG)** can be used to share EMIS and Vision records and will be subject to local sharing agreements between the practice and provider organisations

How do I record patient consent preference?

Within the clinical system.

Do I need to do anything to enable this?

TPP SystemOne's EDSM is automatically enabled and cannot be switched off, although practices can configure which users set record consent and when.

The MIG is not yet enabled.

CARE.DATA²

For planning, research and commissioning purposes



A national programme to collect and link data from across health and social care in order to help plan for commissioning services.

Consent Model: Opt-out

Patients are automatically opted-in but can opt-out via the GP practice. There are two types of sharing to opt out of.

1. Patients can prevent their information leaving the GP practice

2. Patients can prevent any information (including secondary care information) being disclosed by the Health & Social Care Information Centre (HSCIC)³

How do I record patient consent preference?

You should use the following Read Codes:

1. Dissent from secondary use of GP patient identifiable data: **9Nu0** or **XaZ89**
2. Dissent from disclosure of personal confidential data by HSCIC: **9Nu4** or **XaaVL**

For more information on care.data please see the NHS England website

² NHS England is responsible for managing communications around care.data

³ Patients cannot opt-out of this data being collected, but can object to it being disclosed