

Implementation of the Summary Care Record (SCR)

Guidance for GPs and LMCs in England

The GPC has been informed by LMCs of escalating concerns from GPs about the accelerated implementation of the Summary Care Record (SCR) programme.

Following limited local piloting, patients' summary care records¹ are now going to be uploaded to a central database across England. Five Strategic Health Authorities recently announced they were speeding up their plans². Anyone who does not want to have a Summary Care Record (SCR) has to opt out³ by informing their GP or by completing a form either downloaded from the internet or requested through an '0845' national call centre.⁴

The first SCRs were uploaded in six early adopter areas, the first being in Bolton in October 2007. Following the University College London evaluation, roll out continued to 17 'fast follower' PCTs in early 2009. There are currently 1,139,754 SCRs. The BMA/GPC was consulted about these early adopters and "fast followers", but has not been consulted in relation to the subsequent implementation.

In recent months there has been a push to speed up the implementation. In December 2009, the Department of Health announced that funding would be made available for regionally-based Public Information Programmes (PIPs) provided that the money is used by the end of March 2010. The NHS Informatics Planning document 2010/11 also required SHAs to agree timelines for the creation of SCRs. Five SHAs were given money, which covers half of England:

- NHS London – Public Information Programme has begun in 5 PCTs (1.5 million patients). All Londoners will have received information on the SCR by mid April with uploads intended to be complete across London by March 2011
- NHS East of England – roll out across all PCTs complete by the end of 2010.
- NHS Yorkshire and the Humber –70% of patients will have a SCR by March 2011
- NHS North West and NHS North East

In addition to these five SHA areas, we are aware that PCTs in other SHAs are following suit, including Worcestershire and Wolverhampton.

GPC believes that implementation of the SCR is happening too hastily. Whilst we believe that the SCR has the potential to improve both the quality and safety of patient care, we are concerned at the speed of implementation because it means patients are very unlikely to be aware of that into which they are automatically being enrolled.

An independent evaluation⁵ of the regional pilots found that seven in ten patients in those areas were not aware of the Summary Care Record, which meant they also were not aware that their details would go on to a national database. There needs to be a higher profile national information campaign to ensure everyone can make an informed choice about whether or not they want to be included and we are disappointed that Connecting for Health has not adopted some of the key recommendations from the report that it commissioned.

We think it is important that opting-out is made easier. At the moment there is no opt-out form in the patient information packs currently being sent to patients across the country. They either have to take time out of their day to go and see their GP (with all the attendant inconvenience for both), or phone a call centre, or download a form from the internet and post it. The actual forms are appended to this guidance in PDF format and the direct link to the form on the NHS Connecting for Health website is below:

<http://www.connectingforhealth.nhs.uk/systemsandservices/scr/documents/optout.pdf>

Patients who **wish to opt out** should have the Read Code **93C3** added to their records.

Those patients **who wish to have an SCR** should have the Read Code **93C2** added to their records.

GPC does not believe that the national implementation needs to be, or should be, done in a hurry. We would like to see it implemented carefully area by area in a properly supported and evaluated fashion. This should ensure it improves patient care in the way it is intended to, whilst also protecting patient confidentiality.

We have been informed that PCTs are telling practices that there are no workload implications for practices of SCR implementation. Yet we have been advised that, in the five areas where implementation is happening, practices *are* receiving requests for consultations with GPs specifically to discuss the implications of the SCR, especially with regard to opting out children under the age of 16.

As set out above, monies were brought forward in this financial year specifically to fund local Patient Information Campaigns (PIPs) about SCR implementation and we would advise LMCs to seek clarification from their SHAs/PCTs as to the amounts available and whether the money has been spent on local PIPs.

GPC believes that PCTs should work constructively with LMCs and practices in relation to implementation of the SCR; where necessary, additional resources should be provided, with the agreement and support of LMCs, to assist practices.

GPC has raised, and will continue to raise, these issues with Connecting for Health.

Notes

1. The Summary Care Record is a centrally stored electronic patient health summary to support emergency and unscheduled care. It consists of an initial upload of a patient's medication and allergies from the GP record.
2. The five are: NHS North West, NHS North East, NHS Yorkshire and Humber, NHS London and NHS East of England
3. The NHS in England has adopted a 'consent to view' model which means that a patient will automatically have a summary care record created unless they choose to opt out. However, they should be asked explicitly, on each occasion, before their summary record is viewed, for example during out of hours care or when they go to A&E. The BMA and Joint GP IT Committee agreed to the current consent model being an improvement on the original, but only as part of ongoing piloting with evaluation. They

did NOT agree to this model being used in a roll-out until after evaluation, which has not occurred.

4. NHS Care Records Service Information Line on 0845 603 8510

5. <https://www.ucl.ac.uk/dome/openlearning/scriereport2008>

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