

Accelerating patient access to future health records

*By empowering people to manage their health and care we are able to deliver **better health outcomes, improve patient experience and increase efficiency***



GMS Contractual obligations

2015	<u>Promote and offer facility to access online the information held in coded form</u>
2019	<u>Offer all patients online access to all prospective data on the patient record unless exceptional circumstances apply</u>
2019	<u>Full record access upon written request</u>

To improve access to GP records in the NHS App by giving patients access to their latest health information (November 2022)

[Data Saves Lives: Reshaping Health and Social Care with Data](#)
15 June 2022

Progress

- 7.7m (28%) of patients with online access have access to historic coded records (Jan 2022) and 2.1m (9.8%) have access to all the prospective (future) records.
- This progress is concentrated within a small number of practices; 50/2514 (2%) of TPP GP practices account for 50% of all TPP patients with full record access (Sept 2021).

Background



Implementation timeline



July 2022

July - Oct 2022

1 November 2022

Review

Primary care letter notifying upcoming change, expectations and support available

Support package:

- IG guidance and template DPIA
- Updated RCGP toolkit
- Short guidance videos
- Shared learning and assets from early adopters/pilots
- Ongoing webinars

digital.nhs.uk/records

System preparedness and increased provision of record access

Locally-led initiatives that increase access to gain confidence in record access systems and embed change.

System-wide communication and engagement ahead of change

General practice identities patients at risk to be excluded from national switch-on.

National switch-on

GPIT systems updated to provide all patients with access to their future information (unless excluded)

Monitor benefits and impact

Central and local monitoring for reported incidents/service issues.

Targeted support based on surveillance

Further record access system improvements (GP2GP, workflow)

General practice staff should be aware that the record may contain information which the patient must not see, or could be harmful if the patient is unable to keep their record secure.

GPIT system functionality exists to:

- customise/remove patient record access
- redact individual free-text consultation notes, clinical codes and documents from view, or amend access after changes have been made
- identify individual at-risk patients by adding a [\(SNOMED CT\)](#) code to their record. These patients will not automatically receive access to future information.

The RCGP has updated its **patient online toolkit to reflect these changes**. This toolkit covers situations where safeguarding concerns may arise, and the steps to consider to mitigate these risks.

When not to provide access



The patient is unable to keep their record secure - for example if they have a coercive partner who will force them to share their access and use this to extend their control.

The patient has an ongoing risk of serious harm - for example someone with moderate to severe anxiety where access to records may make their anxiety worse if they have 24/7 access.

Ongoing access to the records would place someone else at risk - for example if records access could lead to escalated violence or aggression to general practice staff.

16 Early Adopter sites across England

Metrics

- Telephone data
- Enquiries tally
- Report clinical incidents
- Staff questionnaire
- Patient questionnaire
- Feedback sessions

Redaction

Average of 1.5 documents/week/1000 registered patients and 0.33% of consultations required redaction

Exclusions

Most sites initially excluded 0-8% of their patients with the exception of one site that excluded 30%. Exclusion rate decreased over time as patients were individually reviewed and we typically expect 1-5% of patients to be excluded.

Early Adopter experience

Implementing prospective access was a **less difficult experience** than initially anticipated - "Turning the access on for patients was easier than first thought."

Access is likely to take place predominantly **via the NHS App**

Increased practicality to view test results and vaccination list - "I am more interested in having a healthy lifestyle and make sure that appointments for screening are up to date as I can see when I am due for blood tests etc. Easily."

Reduced workload for practice staff - "Our receptionists can be doing other work instead of answering calls about test results."

Key approaches to mitigate concerns

- Establish a **positive approach** internally and extend this to patients
- Form a multi-disciplinary workgroup that involves **all staff** groups
- Appoint staff **ambassadors** to kickstart momentum and provide reassurance
- **Collaborate** with other practices to share experiences and support each other

[Key learning from early adopter sites](#)

Concerns Raised by the Profession



- Generally supportive of the principle of record access
- Redaction – tools and workload
- Clinical Safety
- Legal background and contract wording
- Options
 - Ask system supplier for delay
 - Restrict access using local system configuration
 - Focus search to identify patients who may be at greater risk
 - Exempt all practices and enable on individual patient request

Questions

Annex

We are supporting general practice to prepare for this change with:

- Specific IG guidance and template DPIA
- Series of short informative YouTube videos
- Shared learning from our 16 early adopter sites
- Weekly webinars, including Q&A and direct support from the national change management team
- Supplier specific guidance on how to use GPIT systems
- RCGP NHSE updated patient online guidance to support training

This will be communicated across the health systems and tracked at a practice-level to ensure every general practice has awareness ahead of the change.

Local system support teams will also be upskilled to prepare practices through train-the-trainer engagement and a toolkit of resources.

A range of resources will be available to support including:

- [IG guidance and template DPIA](#)
- Updated [RCGP guidance](#)
- A series of [short YouTube videos to support staff training](#)
- [General practice checklist](#) and shared good practice from early adopter sites available on [FutureNHS](#)
- [National clinical safety case and hazard log](#)
- [NHS App guidance for GP practices](#)
- [Set up an NHS App test patient](#)
- [NHS App help and support for patients](#)
- [Access to patient records through the NHS App](#)

GPIT training

- Commissioners should already provide a training service for practice staff to support the safe and effective use of clinical systems and national digital services ([Digital Services Operating Model](#)).
- Specific “train the trainer” sessions are available to local GP IT training teams. Email england.NHSEimplementation@nhs.net

Pathway for practices to report incidents



A central mailbox is available to raise issues directly to the programme and implementation team and webinars will continue throughout with dedicated Q&A and feedback. In addition, the following processes will be highlighted:

Technical errors	<p>Report technical errors or issues to the local service desk or clinical system supplier as per usual processes.</p> <p>Unresolved issues escalated via service management.</p>	<p>Monitoring of NHS App service desk queries and NHSD service management.</p> <p>Escalation from local ICS teams directly or via local engagement sessions.</p> <p>Escalation from system suppliers through regular engagement session.</p>
Safeguarding incidents	<p>Reported to local safeguarding team (who in turn escalate as needed to NHSE)</p>	<p>NHSE Safeguarding team inc. sight of serious case reviews and coroner cases.</p> <p>Engagement via National Named Safeguarding leads network.</p>
Patient safety events	<p>Use the new LFPSE service at https://record.learn-from-patient-safety-events.nhs.uk/ (you can report anonymously or create an account)</p>	<p>Relevant reports forwarded to programme team for review.</p>