



Patients

Frequently asked questions

Answers to the following questions are designed to help explain the aims of the Joining Up Your Information project, how it will benefit patients and how it is developing. If you have a question that you don't feel is answered here you can submit it by email to mylocal.sharedcareinfo@nhs.net

Who is responsible for the initiative?

The Joining Up Your Information project is being led by NHS Gloucestershire Clinical Commissioning Group (the NHS body led by GP practices that buys NHS care in Gloucestershire) and has representation from all the main Gloucestershire care providers:

- GP Practices
- Gloucestershire Hospitals NHS Foundation Trust
- Gloucestershire Care Services NHS Trust
- 2gether NHS Foundation Trust
- South Western Ambulance Service Foundation Trust
- Gloucestershire County Council.

Patient groups are also being consulted.

Why do you want to share my health records?

Technology allows us to give clinicians and social care professionals instant access to the most up-to-date information about the people we are looking after.

We want to use this technology to provide the best care possible. The key benefits of sharing information in this way include:

- Improving patient safety
- Fostering more co-ordinated and joined up care
- Reducing duplication of laboratory tests
- Cutting the time spent by clinicians getting information from more than one source
- Reducing emergency admissions and the time people have to stay in hospital.

Is this a local or national project?

This is a local project. In the main, this means that the sharing is limited to Gloucestershire, but if a patient lives on a border and has treatment in a hospital in an area outside the county, for example, Swindon or Bristol, then it makes sense for clinicians treating them to be able to see their information.

You may have heard about other NHS data sharing initiatives. These are separate to your local shared care information.

These include:

- **Summary Care Records** - SCRs allow a limited amount of your information to be shared between NHS clinicians nationally. They are designed to improve the quality of care in emergencies and when your GP practice is closed. You can discuss with your GP if you wish to have additional information added to your SCR.

[More information from NHS England about Summary Care Records](#)

- **Care.data** – This is not yet in operation but the plan is that details will be extracted securely from data held by GP practices and NHS organisations and the information will be used to improve planning and co-ordination of NHS services across England.

[More information from NHS England about care.data](#)

- **Local clinical care audits** - Gloucestershire Clinical Commissioning Group (CCG), the GP-led body that funds NHS care in the county, carries out clinical audits.

These audits help GPs to understand the health needs of their patients more accurately and mean the CCG and others involved in health and social care planning can make the best use of resources across the county. They have proved particularly useful in helping practices to improve how they identify and treat diabetes and dementia in the county.

The CCG follows strict guidelines to ensure the information it receives is anonymous and is analysed securely and confidentially. The information goes through an automatic process so anything directly identifying a patient is removed before being passed to the audit team.

NHS numbers are used so GPs can identify patients who need additional care.

You can opt in or out of this process by contacting your GP practice.

[More information about Gloucestershire CCG's local clinical audits](#)

Some GP practices say they are already sharing information – is this the same as the Joining Up Your Information project?

No.

Some GP practices (about half in Gloucestershire) and other NHS organisations use a patient record system called SystmOne. This allows sharing with other SystmOne organisations only.

We want to create a joined up system where any of the professionals who might be caring for you have access to your records. This includes the Royal Gloucestershire Hospital and Cheltenham General Hospital, the mental health trust (2gether), the ambulance service (South Western Ambulance Service) and also Gloucestershire County Council social care teams.

All of these organisations use specialised systems designed for their needs.

The JUYI project will allow each of these specialised systems to be joined together to create a care record with information from all the professionals you have seen.

Why is my information not shared electronically already?

Historically, different parts of the NHS have had their own paper records and information is exchanged using letters, telephone calls and faxes.

The ability to store health information digitally and provide access to it means the NHS is now starting to transform the way it handles this information.

This initiative is part of that process and we believe it will improve the quality of care you receive and reduce the amount of time spent by staff tracking down accurate, up-to-date information.

When will you start sharing this kind of information electronically?

We intend to have everything in place to begin sharing information by summer 2016.

What sort of information will be available?

The shared information would typically include the kind of details that different health teams are often sharing already through telephone calls, letters and faxes. All it will do is make the information available in a view-only format, electronically.

The types of information include:

- Medication and any changes to it made by a clinician
- Medical conditions
- Operations/treatment received
- Contact details for next-of-kin and others involved in care
- Tests that GPs or hospital clinicians have requested or carried out
- Appointments (past and planned) and recent visits to the Out of Hours GP and Minor Injury Units
- (To follow phase one) Documents, such as care plans and letters about treatment (for example “discharge summaries” following a hospital stay).

An information-sharing control group (including clinicians and patient group representatives) will be set up to control and monitor which data is shared and who should see it. The group will review any changes to the way the information might be used.

As treatment within the NHS develops, use of this information might allow clinicians to improve the quality of your health and care services, ensuring they are safe, effective and well managed. Details of any developments will be published on the Joining Up Your Information pages at **www.mylocalsharedcareinfo.org**

Who will have access?

Just like existing controls on healthcare information, staff should only gain access if they have a legitimate reason to do so.

We will use a secure, encrypted system and it will keep a record of everyone who has viewed patient details, when they accessed it and the information they were viewing.

Access to shared care information will be monitored and checks will be carried out by the information-sharing control group (clinicians and patient group representatives) to ensure the system is being used properly. They will agree what data is shared and who should see it.

Can I change my mind?

Yes.

Whether you are happy to share your information or you decide to opt out, you can change this decision at any time by contacting us at mylocal.sharedcareinfo@nhs.net or by telephoning 0800 015 1548.

Can I see my information or could someone ask to see it on my behalf?

Yes.

You have the right under the Data Protection Act 1998 to request access to any information that organisations like the NHS hold about you. This includes copies of paper, electronic and hybrid patient health records.

For more information about how to view your health care records write to Gloucestershire CCG, Sanger House, 5220 Valiant Court, Gloucester Business Park, Brockworth, Gloucester, GL3 4FE. Telephone 0300 421 1500 or email GLCCG.enquiries@nhs.net

To discuss receiving information in other formats (e.g. other languages, Braille, audio and large print) speak to Patient Advice and Liaison Services by calling Freephone 0800 015 1548.

Will everyone who has access be able to see all my information?

No.

Access will only be given to an agreed set of local health and social care professionals and the intention is that they will only be able to view information appropriate to their role (e.g. doctor, nurse, physiotherapist).

The type of information to be shared and how much each role can view will be agreed and monitored by the information-sharing control group. This will have GPs, hospital doctors, nurses, a selection of other health and social care professionals and patient representatives as its members.

How will you prevent the information being used inappropriately?

Healthcare information, like all confidential patient data, will not be made public, passed on to third parties, used for advertising or sold.

The same principles apply to this information. Existing codes of conduct for NHS and local authority staff mean they must respect patient privacy and keep all information about patients safe.

Will I be asked every time a health and social care professional wants to view my information?

If a GP refers you to a service (for example, for a hospital appointment or for an assessment), it will be assumed that you are happy for the health or social care professional caring for you (for example, doctor, nurse or social worker) to be able to view relevant information to help them provide the best care.

If, however, someone is seen as an emergency (in accident and emergency or by an out-of-hours GP, for example) the clinician must ask for permission (where the patient is capable of giving it) before viewing patient information.

Can a relative who is a health and social care professional access information as part of their role?

Health and social care professionals would not normally be involved in providing treatment for other members of their own family.

Staff should only gain access to patient information if they are directly involved in your care or they have a legitimate reason to do so.

As with existing details, any attempts to access information inappropriately would be regarded as a serious breach of confidentiality and could be subject to disciplinary action. Access to shared information will be strictly monitored.

I am a parent/guardian or have power of attorney over someone and I don't want their records to be made available. What do I need to do?

You can request that someone you are responsible for is opted out. This request will be considered by your GP who will make the final decision.

While your GP will respect your views and may wish to discuss them with you, they could decide that it is right that details are shared – usually on the grounds of patient safety and providing the best and most appropriate care.

Are dentists and organisations delivering private medical care involved?

No.

The shared health and social care record will not be available for dental practices and private medical care providers and including them has not been discussed in detail, so far.

They could be considered for inclusion in subsequent phases but only if technical and patient consent issues can be resolved.

Community pharmacies and chemist's shops are not part of the project at present.

NOTE: Sharing with dentists and private medical care providers, where necessary and with patient consent, will continue in the same ways that it does at present.

What about Gloucestershire patients in the St Briavels area who are registered with the Wye Valley practice?

Only patients registered with Gloucestershire GP practices are included in the local shared care project for Gloucestershire.

Some patients in the Forest of Dean attend the GP surgery at St Briavels. Although in Gloucestershire, this is part of the Wye Valley practice, which has its main site in Trelleck, Wales, and is funded by the Aneurin Bevan Health Board – part of NHS Wales.

These patients are not part of the Joining Up Your information although it is expected that information sharing agreements will develop over time with neighbouring organisations where it makes sense – particularly for people who live near the county borders and are likely to receive treatment beyond Gloucestershire.