

Communications toolkit
for participating organisations



About this toolkit

The information provided in this toolkit can be used by all partners signed up to the Yorkshire and Humber Care Record to enable them to communicate this approach with key audiences including staff and citizens.

Currently the following partner organisations are involved in the Yorkshire and Humber Care Record in the Humber, Coast and Vale region:

|  |  |
| --- | --- |
| **Name of Practice** | **CCG Area** |
| Wolseley Medical Practice | Hull CCG |
| Drs Chalmers & Meier (tbc) | North East Lincs CCG |
| Ancora Medical Practice | North Lincs CCG |
| Scarborough Medical Group | Scarborough and Ryedale CCG |
| Hunmanby | Scarborough and Ryedale CCG |
| Ampleforth & Hovingham Surgeries | Scarborough and Ryedale CCG |
| Sherburn Group Practice | Vale of York CCG |
| Haxby Practice | Vale of York CCG |
| Tadcaster Medical Centre | Vale of York CCG |
| Riverside Surgery | North Lincs CCG |
| Winterton Medical Practice | North Lincs CCG |
| South Axholme Practice | North Lincs CCG |
| Kirton Lindsey and Scotter Practices | North Lincs CCG |
| Riding Medical Practice | East Riding of Yorkshire CCG |
| The Killingholme Surgery | North Lincs CCG |
| Priory Medical Group | Vale of York CCG |
| Scott Road Medical Centre | Vale of York CCG |
| Roxton Practice | North East Lincs CCG |
| Roxton at Weelsby View Practice | North East Lincs CCG |
| Posterngate Surgery | Vale of York CCG |
| Pickering Medical Practice | Vale of York CCG |
| Haxby Group Hull | Hull CCG |
| Cambridge Avenue Medical Centre | North Lincs CCG |

Communications materials should only be used once your organisation has signed up to the Yorkshire and Humber Care Record.

If you have any questions about this process, please email tara.athanasiou@idealts.co.uk or ring 07733 171812.

Comments, suggestions, queries or concerns

We always appreciate comments and suggestions for improving our work.

Contact the programme team via tara.athanasiou@idealts.co.uk

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Section one:
Information for organisations

Why do we need a Yorkshire and Humber Care Record?

Yorkshire and Humber Care Record will become a fully integrated health and social care record for patients and citizens across the Yorkshire and Humber region to support care. It has been developed with the intent of enabling all organisations providing health and social care support in the region to share care information with one another. Over the course of time this will include NHS organisations, local authority services and services provided by independent sector partners under the “any qualified provider” initiative (a means of commissioning certain NHS services in England).

To enable the Local Health and Care Record to realise its full potential, participating partner organisations are being asked to sign up to a new information-sharing agreement – the purpose of this is to provide a robust and legal framework for sharing care information between agencies in Humber, Coast and Vale to support improved health and social care.

What is the new sharing agreement?

Health and social care service providers have a responsibility to ensure that their use of personal data is lawful, properly controlled and that individuals’ rights are respected.

In addition, there is a need to share information to ensure that patients receive the safest and most appropriate care, to reduce duplication and to provide a joined-up approach to care.

Currently, local data-sharing agreements exist between some NHS and local authority services. A new information-sharing agreement has been jointly developed by commissioners and health and social care service providers in Yorkshire and Humber. This information sharing agreement, specifically developed for the Yorkshire and Humber Care Record, aims to help improve the quality of care, by enabling health and social care agencies supporting individuals to share their personal or sensitive information.

How will the Yorkshire & Humber Care Record work?

The Yorkshire & Humber Care Record can be adapted and changed locally to meet the requirements of our information systems and the specific needs of our population.

A sample of GP practices using the system are the first to adopt the approach, which will join up the records of practices with those held by the Leeds Teaching Hospital. We are now working towards the vision to ultimately join together the records of practices, community, mental health, acute health and social care service providers across the region.

This work has already begun; integrated health and adults’ and children’s social care teams are now sharing information about citizens that receive care and support from both services in various places across Yorkshire and Humber and nationally. The Yorkshire & Humber Care Record takes this work further by ensuring that a much broader range of health and social care information held about a person is linked together into one virtual portal and shared when there is a direct care need to do so.

The record is currently read-only. Information on each clinical system can only be changed at the source by those authorised to do so.

What are the benefits of a single care record?

Evidence from other areas that use a single care record shows that benefits include:

• better coordinated and safer care

• more time to spend on care

• less paperwork

• fewer unnecessary tests

• more accurate prescriptions

• better self-management for individuals

• more efficient use of health and social care services.

Does this mean a new clinical system?

There are no plans to introduce a single medical records system in Yorkshire and Humber. The region has hundreds of different health and social care IT systems which hold individual’s information in different ways. Organisations will still have their system of choice; the Yorkshire & Humber Care Record is an additional tool to bring key health and social care information together from multiple sources in one record view.

Access to information is still restricted to clinical and care staff and only available where there is a legitimate reason to access the information.

What are the next steps for my organisation?

To join the Yorkshire and Humber Care Record, you will be asked to sign up to a new information-sharing agreement which will be administered in line with a ‘Fair Processing Notice’ (an example of which is included on page 9). In addition, each participating practice or organisation is legally required to have a fair processing notice in place.

Once the organisation has signed up, to contribute towards the Yorkshire & Humber Care Record, a defined set of relevant information can then be extracted from your system and transmitted to Leeds Teaching Hospital, which is hosting your Yorkshire & Humber Care Record) via secure encrypted systems. There will be no changes to your practice or organisation system. Organisations are legally required to make patients and service users aware of the Yorkshire & Humber Care Record and the materials included in this pack enable you to do this.

How is information in the Yorkshire & Humber Care Record updated?

Links from your system into the Yorkshire & Humber Care Record will be set up so that defined health and social care information can be updated in virtually real time. This means that anyone viewing an individual’s Yorkshire & Humber Care Record can see the latest health and social care information about that individual.

Who will be able to see the information?

Information will be viewable by clinicians and care staff only.

The aim is to be able to bring together bring together information from:

* GP practices
* Acute hospitals
* Community Healthcare
* Mental Health Trusts
* Adults’ and children’s social care services

To begin with, information will be accessible to participating organisations.

This will increase as more GP practices, departments and organisations come on board and as electronic patient record systems are integrated into the Yorkshire & Humber Care Record and other participating organisations as listed above.

What will I be able to see?

The Yorkshire & Humber Care Record will provide a common set of information on each individual that clinical and care staff will be able to access to help them provide even better care and support, provided there is a direct care relationship with that individual. Examples of this will include:

• demographics and contact details

• list of diagnoses

• medications

• vaccinations

• allergies

• GP activity (dates/times)

• hospital activity (dates/times)

• test results

• referrals, clinic letters and discharge information

• Care plans, including end-of-life preferences.

The benefit of having a Yorkshire & Humber Care Record is that participating organisations can work together locally and regionally to identify the kind of information that needs sharing and develop the care record accordingly.

How is the Yorkshire & Humber Care Record being communicated to patients?

Writing individually to all of the patients in Yorkshire and Humber would be a costly exercise for the NHS.

Instead, the programme team have agreed to lead a public awareness campaign to help people understand the purpose of the Yorkshire & Humber Care Record and provide them with information on their right to object if they wish to do so.

We are working with individuals to understand the kind of questions people may have about the Yorkshire & Humber Care Record. We have also asked them how they think we should promote the Yorkshire & Humber Care Record to other citizens.

Where can I get awareness materials?

All the awareness details we expect you to need are provided in the communications pack that your organisation will receive when you are trained on how to use the system. This includes posters, leaflets and other campaign materials which will help us all to raise awareness of the Yorkshire & Humber Care Record to your patients and service users.

We would recommend that organisations display posters and leaflets in prominent locations in the building and use the FAQs and covering letter to address any specific questions which are included within section two of this toolkit. We would also recommend that you include information provided in this toolkit on your website and newsletters and inform your patients and service users as part of existing forums.

In order to process the information for the Yorkshire & Humber Care Record it is necessary to be clear and open with patients and service users about how their information will be used. We would recommend organisations update their ‘Fair Processing Notices’ to include the Yorkshire & Humber Care Record, (an example of which is included on page 11).

What happens if there is a legal challenge?

• If an individual makes a complaint about alleged improper use of their Yorkshire & Humber Care Record, this would fall to the alleged GP practice or organisation to resolve directly with complainant.

• If a GP practice receives a challenge on the legal basis to sharing, the CCGs would provide support to the GPs.

• The Information Sharing Agreement has been ratified by Information Governance experts in the region and with support from the Information Commissioners Office (ICO).

Do I need to request consent from the patient or service user to access their Yorkshire & Humber Care Record?

No. Health and social care providers have determined the appropriate legal justification upon which this information can be shared for the purposes of the Yorkshire & Humber Care Record. However, if the individual is with you it would be good practice to discuss the Yorkshire & Humber Care Record with them and the purposes for which it is used. It is accepted that there will be instances where you are providing care for a patient or service user and need to access their Yorkshire & Humber Care Record when they are not there, for example preparation ahead of a consultation or when discussing a complex patient or service user’s needs with other care professionals involved in the patient or service users care.

Section two:
Information for patients or service users

**Frequently Asked Questions**

**What is the Yorkshire and Humber Care Record?**

At the moment, every health and social care organisation that you use has a different set of patient or service user records for you. These records may duplicate information or one record might hold information about your treatment, care and support that another one doesn’t. To provide the best care to you as a patient or service user it is essential that health and social care professionals have access to the most up-to-date information.

It will be a secure virtual health and social care record. It will pull key information from different health and social care records and store it in one combined record. This enables health and social care professionals to find all the key information for your care in one place.

**Why do you need to share my information?**

To provide the best treatment, care and support to you as a patient or service user it is essential that health and social care professionals have access to the most up-to-date information. Information is already shared between health and social care organisations by phone and through paper records. Sharing health records allows this sharing process to happen more efficiently, enabling better care for you.

Healthcare organisations across Yorkshire and Humber are working together to further improve health and social care across the region. Health and social care professionals have a duty to share relevant information between them if they are involved in providing you with care.

Types of information that may be shared include:

* Address & telephone numbers
* Problem diagnosis list
* Medications prescribed
* Recorded allergies
* Care plans outpatient appointments, inpatient stays & clinical contacts
* Referrals, clinic letters & discharge information
* Test results
* Community treatment orders
* Contact details of care professionals
* Care Plans, including end-of-life care preferences.

**How do I know my records are kept secure?**

By law, everyone working in, or on behalf of, the NHS and social care must follow strict information governance rules designed to respect your privacy and keep all information about you safe. Information is held on secure, encrypted systems which keeps a record of everyone who has accessed a patient record, the time and date when they accessed it and the information they were viewing. The laws on data protection are clear and we take them very seriously. We regularly check to make sure that only people who need to see your patient record are viewing it.

**Can anybody see my records?**

Your medical records will still be confidential. They will only be looked at by people who are directly involved in your care. Your information isn’t shared with anyone who doesn’t need it to provide treatment, care and support to you.

Your details will be kept safe and won’t be made public, passed on to a third party who is not directly involved in your care, used for advertising or sold.

**Accessing your own health and care records?**

Patients have the right under Section 7 of the Data Protection Act (1998) to request access to any information that an organisation holds about them. Each individual organisation that contributes information to your Yorkshire & Humber Care Record has a responsibility to handle these “Subject Access Requests”.

Should you wish to access your records this way, contact the organisation who holds the part of the record you are interested in directly, e.g. your GP, hospital, mental health trust or social care team.

**Can I object to my records being shared?**

Yes. You have the right to object to your health and care records being shared. However, if staff require access to the information shared on our Yorkshire & Humber Care Record to provide safe individual care they are legally allowed access.

For further information, contact the Access to Health Records team at Leeds Teaching Hospitals NHS Trust:

T: 0113 20 65824

Access to Health Records
Leeds Teaching Hospitals NHS Trust
St James University Hospital
Lincoln Wing / Chancellor Wing Link Corridor
Becket Street
Leeds
LS9 7TF

**What do I do if I would like to make a complaint about improper use?**

Please contact the care provider alleged of improper use directly to register a complaint.

Resource: article for organisation's newsletters

Launch of Yorkshire & Humber Care Record will improve your care

The Yorkshire & Humber Care Record is being rolled out across region with the aim of improving care for people who use NHS and social care services.

There are hundreds of clinical computer systems across Yorkshire and Humber. They all hold clinical information about patients who have used services provided by their GP, at a local hospital, community healthcare, social services or mental health teams. Each record may hold slightly different information. The Yorkshire & Humber Care Record will bring together certain important information from all of these systems so that medical and care information held about a patient or service user can be centralised into one easy-to-use system.

All of your records will still be strictly confidential. They will only be looked at by clinical care staff who are directly involved in your care.

The Yorkshire & Humber Care Record will support people working in health and social care services to provide you with better and more joined-up care. It will make care safer because everyone involved in treating you will have access to the most up-to-date and accurate information about the medicines you are taking and any allergies that you have for example. It will also help to avoid unnecessary or duplicate tests and procedures, and reduce paperwork for doctors, nurses and other staff, giving them more time to spend on patient care.

Insert Case Study here e.g. a quote from a practice GP. “I have been waiting for a system like this to come along for years. It will save so much time and make patient care safer and more cohesive. At present, my team have to make lots of phone calls to get access to information about what’s happened to our patients at the hospital. This will save us significant time, but more importantly, we will have the right information to hand to deliver the best care to our patients.”

You can choose not to have a Yorkshire & Humber Care Record. It is your choice but sharing your medical and social care information through the Yorkshire & Humber Care Record will make it easier to provide the best quality care and support for you.

Section three:
Fair processing notice

Fair Processing Notice - Adults

Security of information

Confidentiality affects everyone. We as a <organisation type> have a legal basis to gather, store and process large amounts of information on a daily basis. This includes medical records, personal records and computerised information for the purposes of preventive or occupational medicine; medical diagnosis; or if the process is necessary for the performance of a task carried out in the public interest. This information is used by many people throughout the course of their daily work.

Our duty to protect information and confidentiality is taken very seriously. We are committed to taking all reasonable measures to ensure the confidentiality and the security of all information for which we are responsible, whether computerised or on paper. This includes regular staff training on the legal obligations they have to maintain confidentiality and security of information at all times.

We have appointed a Senior Information Risk Owner who is accountable for the management of all information assets and any associated risks and incidents, and a Caldicott Guardian who is responsible for the management of patient information and patient confidentiality.

The <organisation name> takes staff training extremely seriously. This is to ensure that nobody will access or use your information without a relevant reason, and to stop accidental loss, damage and destruction of any of your medical, personal and electronic records.

Why do we collect information about you?

To make sure you get the best care doctors, nurses and the team of healthcare staff caring for you keep records about your health and any care or treatment you may receive from the NHS. These records help to make sure that you receive the best possible care. These may be written down in your paper records or held on a computer. They may include:

* Basic details about you such as name, address, date of birth, next of kin, etc.,
* Contact we have had with you such as appointments or clinic visits,
* Notes and reports about your health, treatment and care,
* Results of x-rays, scans and laboratory tests,
* Relevant information from people who care for you and know you well such as health professionals and relatives,
* Details of care plans.

Always check that your details are correct when you visit us and please tell us of any changes as soon as possible.

How your personal information is used

Your records are used to manageand deliver the care you receive to make sure that:

* The doctors, nurses and other healthcare members of staff involved in your care have correct and up to date information, to look at your health and decide on the right care for you,
* Healthcare staff have the information they need to be able to look at and improve the quality and type of care you receive,
* Your concerns and worries can be properly investigated if a complaint is raised,
* The right information is available if you see another doctor or are referred to a specialist or another part of the NHS.

Who do we share personal information with?

Everyone working within the NHS has a legal duty to keep information confidential. Similarly, anyone who receives information from us has a legal duty concerning your confidentiality. The partner organisations with which we share information are:

* Other NHS Trusts and hospitals that are involved in your care,
* CCGs. (Clinical Commissioning Groups),
* General Practitioners (GPs),
* Ambulance Services,
* Adults’ and children’s social care services.

You may be receiving care from other sectors as well as the NHS. Therefore, we may need to share information to other agencies about you, so we can all work together for your benefit. We will only do this if they have a legitimate need, or we have your permission. These agencies include:

* Social Care Services.
* Education Services.
* Local Authorities.
* Voluntary and private sector providers working with the NHS.
* General Medical Council

We will not provide your information to any other third parties without your permission unless there are exceptional circumstances, such as, if the health and safety of you and others is at risk or if the law requires us to pass on information.

The Yorkshire & Humber Care Record

The Yorkshire & Humber Care Record is a shared system that allows Healthcare staff within the Humber, Coast and Vale Health and Social Care community to appropriately access the most up-to-date and correct information about patients, to deliver the best possible care.

The Yorkshire & Humber Care Record Guarantee is our commitment that we will use records about you in ways that respect your rights and promote your health and wellbeing.

If you would like any further information, or would like to discuss this further, please contact us using the details provided below.

Disclosure of information

You have the right to object to how and with whom we share the information that is within your records that could identify you. This will be noted within your records so that all staff involved with your care and treatment are aware of your decision. By choosing this option, it may mean that the delivery of your care or treatment more difficult. You can also change your mind at any time about your decision.

If your consent is relevant, you are required to provide this in writing. This is essential as you may change your preference regarding consent further down the line. You as an individual also have the right to withdraw your consent at any time.

How your personal information is used to improve the NHS

Your information will also be used to help us manage the NHS and protect the health of the public by being used to:

* Review the care we provide to make sure it is of the highest standard and quality,
* Make sure our services can meet your needs in the future,
* Investigate your queries, complaints and legal claims,
* Make sure the <organisation type> receives payment for the care you receive,
* Prepare statistics on NHS performance,
* Audit NHS accounts and services,
* Undertaking heath research and development,
* Helping to train and educate healthcare staff.

The National Data Guardian opt-out programme is a new service that allows people to opt out of their confidential patient information being used for research and planning, which has over taken the Type two opt out.

Please see

<https://digital.nhs.uk/services/national-data-opt-out-programme>

Call recording and CCTV

Telephone calls to the <organisation name> are routinely recorded and we also operate CCTV cameras on all our hospital sites. Data is captured for the following purposes:

* To prevent crime or misuse,
* To make sure that staff act in compliance with Trust procedures,
* To ensure quality control,
* Training, monitoring and service improvement

SMS text messaging

When attending the <organisation name> for an outpatient appointment or a procedure you may be asked to confirm that the <organisation name> has the correct contact number for you. This can be used to provide appointment details via SMS text messages and automated calls to advise you of appointment times.

How you can access your records

The Data Protection legislation gives you a right to access the information we hold about you in our records. Requests must be made in writing to the Access to Health Records Department. The Trust will provide your information to you 30 calendar days from receipt of:

* A completed application form, containing adequate supporting information to enable us to verify your identity and locate your records,
* An indication of what information you are requesting, to enable the <organisation type> to locate it in an efficient manner.

You as an individual have the right to have erased any records that have been inaccurately added to your medical records, personal records or other computerised system. If you think any information is inaccurate or incorrect, please contact us using the details below.

Ultimately, if you are unhappy with the way we have handled your information you have the right to make a complaint to the <organisation type> or to the Information Commissioner’s Office (the ICO).

Retention

The retention period for medical records once you have been discharged from care is eight years. Once this period is up your records will then be destroyed within the guidelines set out by the Data Protection legislation. There are some exemptions to this, such as maternity and child’s records; these will be kept for 25 years.

Data controller

The Data controller responsible for keeping your information confidential is:

**<organisation name>**
**<address>**
**<address>**
**<address>**
 **Telephone:** <xxxxxxxx>

**The Trust’s Data Protection Officer is <full name>**

**Freedom of Information**

The Freedom of information Act 2000 provides any person with the right to obtain information held by the <organisation name>, subject to exemptions.

Notification

The Data Protection Legislation requires organisations to lodge a notification with the Information Commissioner to describe the purposes for which they process personal information. These details are publicly available from:

**Information Commissioner’s Office**
**Wycliffe House**
**Water Lane**
**Wilmslow**
**SK9 5AF**
**Telephone:** 08456 306060
**Website:** www.ico.gov.uk