



Your emergency care summary



## **Community pharmacy access to Summary Care Records – An Introduction**

### **1. What are Summary Care Records?**

A Summary Care Record is an electronic patient summary, from a patient's GP practice system, containing key clinical information.

It is accessible by authorised healthcare staff treating patients in urgent or emergency care settings.

It is optional - a patient can choose to have or not have an SCR.

It is only accessible with permission from the patient (except for exceptional circumstances e.g. emergency access if the patient is unconscious).

It is ONLY accessible on an individual patient by patient basis.

As of May 2014, 38 million patients in England have an SCR available to be viewed.

### **2. When will pharmacies be able to access SCRs for their patients?**

The Health and Social Care Information Centre has been commissioned by NHS England to deliver a small number of proof of concept (PoC) projects for viewing the Summary Care Record in community pharmacies.

The potential PoC areas have been selected based on criteria to ensure high level of summary care record availability in the area, a fair mix of pharmacy providers, and key local stakeholders are aware and supportive of the project. The areas are: West Yorkshire and Sheffield, East Midlands (Northamptonshire and Derbyshire) and Somerset.

It is expected the pharmacies in the PoC areas will start to access SCR early October 2014, with the completion and recommendations for any future rollout, if appropriate, no later than March 2015.

### **3. How do you access them?**

You need a smartcard, along with the specific SCR roles assigned to it.

You need to be on the N3 network.

You need to be able to access the NHS Spine web-portal, known as the Summary Care Record Application (SCRa).

#### **4. What information is on it?**

All known allergies & adverse reactions recorded for that patient on the GP system.

All medications within the following conditions:

- Acute medications (6 or 12 months depending on the GP system)
- Current repeat medications (last issue date dependant upon GP system)
- Discontinued repeat medication (6 months)

If the GP practice/patient has chosen to add additional information, eg. diagnoses, personal preferences, or immunisations then this will also be visible.

#### **5. When should SCR's be used in community pharmacy?**

You MUST only access the SCR for a patient when you have a legitimate relationship with them ie. actually involved in the patient's care at that point in time.

You MUST only access the record when you have patient's permission to view it.

You should only access the SCR for clinical situations classed as urgent or unscheduled care, eg. emergency supply, providing unscheduled advice, out of hours, out of area patients, etc.

You should make a professional judgement as to whether you need to access the SCR on a case by case basis.

#### **6. What controls are in place to monitor and audit access?**

Every action on the SCR application is fully audited and linked to the individual smartcard "logged on" at that time.

Reports are available to show every record accessed by every individual smartcard user.

A governance role, known as a "privacy officer", will monitor and check legitimate relationships. They will investigate any suspected inappropriate access and may contact both the individual that accessed the SCR and the pharmacy contractor that holds the contract. Information from the pharmacy may have to be provided on a regular basis in order to confirm this legitimate relationship.

Pharmacies MUST have clear and robust Standard Operating Procedures (SOPs) in place as part of their approach to Information Governance.

When a user is provided with a smartcard, they agree to use it in line with the Smartcards user policy.

All users MUST adhere to professional code of conduct, and/or their contract of employment.

## What does the system look like?

Once the application has been opened, the first step is to find the patient.

Find a patient   Change role   Help   Exit

### Find a patient

Please search for a patient by either entering their details or **NHS number**


Basic   **Advanced**   Postcode

#### Enter patient details \* Denotes required field

\* Gender    Female    Male

First name

\* Surname

\* Date of birth  

Full postcode    [Address & Postcode Lookup](#)

#### Find by NHS Number \* Denotes required field

\* NHS Number

It will be necessary to record the patient has given their permission for their record to be accessed.

Find a patient   Change role   Help   Exit

**Tiphonie MAGRATH**   DoB 01-Jun-1978   Female   NHS 945 503 5723

### NHS Summary Care Record Access Management

STOP. Has this patient given you permission to view their Summary Care Record?

<input type="button" value="Yes"/> View record	<input type="button" value="No"/> Access refused
---	---

The usual legal ethical and professional obligations apply when accessing a patient's clinical record.

Do you need to access the record for other reasons?  
[Other access options](#)

[View this patient's demographic details](#)  
[Find a new patient](#)

The SCR will then be visible

## General Practice Summary

Sourced from the patient's General Practice record. This summary may not include all the information pertinent to this patient.

Summary created: 27 Mar 2014 16:39  
Created by: JORDAN, Rob  
DR DK NANDI'S PRACTICE, 342 Troy Road, Horsforth, Leeds LS18 5TN

## Allergies and Adverse Reactions

Date	Description	Certainty	Severity	Supporting Information
26 Mar 2014	No known allergies			

## Acute Medications (For the 12 month period 27 Mar 2013 to 27 Mar 2014)

Type	Date	Medication Item	Dosage Instructions	Quantity
Acute Medication	Prescribed: 06 Sep 2013	Glycopyrronium bromide 200micrograms/1ml solution for injection ampoules	use as per local protocol	28 ampoule
Acute Medication	Prescribed: 06 Sep 2013	Levomopromazine 25mg/1ml solution for injection ampoules Supporting Information: {Batch Number} {Pack Size}	use as directed in local protocol	10 ampoule
Acute Medication	Prescribed: 25 Aug 2013	Amoxicillin 500mg capsules	take one 3 times/day	28 capsule

## Current Repeat Medications

Type	Date	Medication Item	Dosage Instructions	Quantity
Repeat Medication	Last Issued: 06 Aug 2013	Alfuzosin 10mg modified-release tablets	take one daily	56 tablet
Repeat Medication	Last Issued: 06 Aug 2013	Laxido Orange oral powder sachets sugar free (Galen Ltd)	1-2 daily	60 sachet
Repeat Medication	Last Issued: 06 Aug 2013	Morphine sulphate 10mg/5ml oral solution	15ml as required 4 hourly	500 ml
Repeat Medication	Last Issued: 06 Aug 2013	Naproxen 500mg gastro-resistant tablets	take one twice daily	56 tablet
Repeat Medication	Last Issued: 06 Aug 2013	Omeprazole 20mg dispersible gastro-resistant tablets	take one daily	28 tablet
Repeat Medication	Last Issued: 06 Aug 2013	Paracetamol 500mg capsules	take two 4 times/day	200 capsule
Repeat Medication	Last Issued: 06 Aug 2013	Pregabalin 100mg capsules	One, twice daily	56 capsule
Repeat Medication	Last Issued: 06 Aug 2013	Zomorph 30mg modified-release capsules (Archimedes Pharma UK Ltd)	One, twice daily	60 capsule
Repeat Medication	Last Issued: 06 Aug 2013	Zomorph 60mg modified-release capsules (Archimedes Pharma UK Ltd)	One, twice daily	60 capsule

## Discontinued Repeat Medications (For the 6 month period 25 Sep 2013 to 27 Mar 2014)

Type	Date	Medication Item	Dosage Instructions	Quantity
Repeat Medication	Last Issued: 07 Jul 2013 ***Date Discontinued: 26 Mar 2014, Reason: Clinical grounds***	Aspirin 75mg gastro-resistant tablets	take one daily	56 tablet
Repeat Medication	Last Issued: 07 Jul 2013 ***Date Discontinued: 26 Mar 2014, Reason: Clinical grounds***	Simvastatin 40mg tablets	take one at night	48 tablet

For further information, please contact [sharonwilson@hscic.gov.uk](mailto:sharonwilson@hscic.gov.uk) or call on 07879 491781.