

**HEALTH AND WELLBEING BOARD: 22 JUNE 2017****REPORT OF LEICESTER CITY CCG, WEST LEICESTERSHIRE CCG AND  
EAST LEICESTERSHIRE AND RUTLAND CCG****SUMMARY CARE RECORD****Purpose of report**

1. The purpose of this report is to provide an update to the Health and Wellbeing Board on the Leicester, Leicestershire and Rutland (LLR) Electronic Record Sharing project, focusing around Summary Care Record (SCR) v2.1.

**Link to the local Health and Care System**

2. The LLR Sustainability and Transformation Plan is building on the Better Care Together programme that identified five key strands for change which contribute to closing the health, wellbeing and care and quality gaps:-
  - a. New models of care: to deliver more care and support in the community through Integrated Locality Teams (ILT)
  - b. ILTs will be responsible for joining up and coordinating the care provided by multiple professionals to patients within their defined place (locality)
  - c. Professionals will have access to a shared record to improve the quality and outcome of patient care: the Summary Care Record**
  - d. All plans are built on a collaborative relationships and consensus
  - e. Access to summary care records by all relevant providers will be essential to achieve this

**Recommendation**

3. The Health and Wellbeing Board is recommended to note the update on the LLR Electronic Record Sharing project

**Policy Framework and Previous Decisions**

4. The Health and Wellbeing Board received a report about the Summary Care Record and Care Planning at its meeting on 5 January 2017 and asked for an update at a future meeting.

**Background**

5. The three CCGs successfully bid for funding under the Estates Technology and Transformation Fund (ETTF) to enable the delivery of shared records across LLR between health and social care colleagues.
6. The Electronic Record Sharing project has three distinct phases:-

(a) Phase 1 was centred around Primary Care and the roll-out of an Integrated Care Planning template, which feeds the Summary Care Record with additional information, when explicit patient consent is recorded. The template also enables the recording of that consent. SystemOne and EMIS versions of the template have been rolled out, and all practices have received training. The aim is that by October 2017 half of all LLR care plan patients with long term conditions will have an enhanced SCR with additional information.

(b) Phases 2 and 3 are concentrated around Provider clinicians and Adult Social Care staff respectively accessing SCR. These two phases both kicked off over the past 6 weeks, and are running concurrently.

7. The key challenges in Phase 2 relate to communications (making clinicians aware of the benefits of SCR v2.1) and operations (eg SCR can be accessed directly or via SystemOne / Do PCs have the required software installed? / Do all relevant staff have smartcards and the proper RBAC roles? etc).
8. Some of these issues also apply to Phase 3, but the main challenge is around the governance of sharing information from health to social care.
9. Phase 2 baseline data:

	<b>VIEW REQUESTS BY PROVIDER</b>	<b>Nov-16</b>	<b>Dec-16</b>	<b>Jan-17</b>	<b>Feb-17</b>	<b>Mar-17</b>
<b>SCR</b>	<b>UHL</b>	<b>2053</b>	<b>2262</b>	<b>2653</b>	<b>2327</b>	<b>2602</b>
	<b>LPT</b>	<b>221</b>	<b>250</b>	<b>222</b>	<b>242</b>	<b>239</b>

### **Proposals/Options**

10. The aim is to facilitate quicker diagnosis and quicker treatment through quicker access to key medical information via electronic record sharing. Predominantly this is to be achieved via SCR, and / or SystemOne to SystemOne sharing (where applicable). A Medical Interoperability Gateway (MIG) has also been used in LLR, but the updated SCR (v2.1) makes it the more attractive option going forwards, in terms of cost to benefit ratio.
11. Other options looked at initially included Patient Knows Best, Coordinate My Care and myrightcare, but ultimately it was felt that these created new silos as much as they facilitated record sharing.

### **Resource Implications**

12. Funding is provided via the EETF, as referred to in paragraph 5.

**Background papers**

Report on the Summary Care Record and Care Planning submitted to the Health and Wellbeing Board on 5 January 2017 - <http://ow.ly/3tT530cy69E>

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**Relevant Impact Assessments****Equality and Human Rights Implications**

13. Due regard to equality, diversity, community cohesion and human rights in our decision-making process has taken place by NHS Digital on behalf of the NHS regarding the Summary Care Record.

**Partnership Working and associated issues**

14. Partnership working is undertaken with health and adult social care colleagues across LLR.

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