Dear Colleagues

CLARIFICATION OF ACCESS TO EMERGENCY CARE SUMMARY

I wrote to you in August 2004 (CMO(2004)14) and again in April 2006 (CMO (2006)06) to inform you about the Emergency Care Summary (ECS) and the principles and agreement underlying it.

As you will know, the ECS was launched in 2006 and has now been accessed over 1.2 million times in A+E, Out of Hours Services and NHS 24. Many health professionals and patients have appreciated its availability as it has meant that accurate and up to date information about medication and allergies/ adverse drug reactions is readily accessible, thus improving safety and efficiency.

The ECS maintenance and development is overseen by the ECS Programme Board which includes wide representation from NHS Boards, professional and academic bodies and patient groups. It has come to light that there may be some confusion about who should be able to access (with consent) the ECS so the attached statement has been put together by the ECS Programme Board to clarify for Boards and individuals what has been agreed.

Further developments of ECS, both in terms of content of the summary and the professionals included for access, will only be rolled out after an inclusive and thorough process of consultation and agreement from all stakeholders overseen by the Programme Board.

You are asked to note the contents of the attached statement and to ensure that your procedures adhere to it.

Yours sincerely

HARRY BURNS
Clarification of Access to the Emergency Care Summary (ECS) system

This purpose of this statement is to clarify the correct use of the ECS in NHS Scotland and ensure that all Health Boards have a clear understanding of who is permitted to have access to patient records. This framework is based on the code of practice on Sharing Personal Information from the Information Commissioner's Office, and has been endorsed by the Emergency Care Summary Programme Board, the Royal College of General Practitioners and the BMA in Scotland.

The purpose of the ECS is to assist clinicians in Unscheduled Care and enhance the care and treatment of patients. Access to an ECS record is only granted with full consent from the patient at the time of care.

A patient leaflet was issued nationally in September 2006 to inform patients of the ECS and posters have been distributed to Practices and Out of Hours organisations. Posters and leaflets should be available wherever the ECS is accessed.

The ECS can be accessed by the following people in Unscheduled Care environments:

All clinicians working in Unscheduled Care where patient consent can be obtained. This includes

- NHS 24 Nurse Advisors and Pharmacists
- Out of Hours Clinicians (including Minor Injury Units)
- Accident and Emergency Clinicians
- Clinicians in acute receiving units
- Pharmacists in Unscheduled or Emergency Care in A&E and acute receiving units.

Access to demographic information is also granted to NHS 24 Call Handlers who confirm patient consent. NHS 24 Call Handlers do NOT have access to clinical information. Access can be granted to receptionists where ECS is required to be printed or for confirmation of patient details.

All users of ECS require a unique user name and password. Generic ‘locum passwords’ are not permitted. Health Boards are responsible for ensuring that usernames and passwords are correctly assigned and that the user is correctly allocated a role for audit purposes. All users must ensure that the patient has given their consent to view their clinical information, except in exceptional circumstances such as unconsciousness when the clinical decision to view without consent can be justified. Any discrepancies or inaccuracies should be reported back to the patient’s GP practice with an anonymised copy to the ECS Programme Manager for information. All users should be aware that regular audits on access are carried out by Health Boards, primary care OOH services, NHS 24 and practices.

ECS must not be used by any other clinical or administrative group, including community pharmacists, dentists, SCI Store users and non-unscheduled care clinicians. The ECS Programme has developed a framework for agreeing and managing any future extension to ECS access and content as part of the national eHealth Programme.

If you have any further queries regarding this or suggestions for future enhancements, please contact Jonathan Cameron, ECS Programme Manager (jcameron2@nhs.net).