Dear Colleague

Clarification of Key Information Summary (KIS) and Emergency Care Summary (ECS) Access

Previous guidance on access to the Emergency Care Summary (ECS) sent out in CMO letter SGHD/CMO(2011)16, dated 13 December 2011, stated that there was a strong consensus to broaden access to the Emergency Care Summary (ECS) particularly in Scheduled Care.

Now that the Key Information Summary (KIS) has been rolled out to all practices in Scotland, the access rules are slightly confusing so the following clarification has been agreed between RCGP, SGPC, patient groups and the Information Commissioner’s Office.

It is important to note that access to the ECS IT system will provide all authorised users with access to Emergency Care Summary and Key Information Summary (KIS) information and there is no separate KIS IT system.

Community

All GP practice clinical and admin staff can view ECS/KIS for all patients registered permanently in their own practice via their clinical systems. Currently there is no way to view ECS/KIS for temporary registrations. Community staff will be able to access ECS/KIS via the GP clinical system if practice based, or their clinical portal if HB based.
Secondary Care, NHS24, Scottish Ambulance Service, Out of Hours Organisations, Hospices and Clinics

A member of staff is permitted access to a patient’s ECS/KIS **ONLY** if it is legitimately in support of the direct care of that patient. While such staff will overwhelmingly be health professionals, on certain occasions administrative/records staff may access a record on behalf of a health professional who wishes to see the ECS/KIS information.

This may be perceived as a widening of access and a relaxation of the rules, however this will make access more secure and ensure that only those staff with a justifiable need to be involved in the care of the patient can see the record. Patients can still opt out of ECS/KIS by informing their GP practice, which will insert a code into the record and ‘switch off’ consent. Practices should all have a separate log in to ECS/KIS web browser to check audit logs if requested by a patient.

With regard to the means of access, all new users will access a patient’s ECS/KIS using a facility within that patient’s record in their own clinical system or portal authorised for use by that member of staff. This method of access is known as “Web Services”. This will ensure that the ECS/KIS system is not overloaded, that staff have integrated access and do not need to manage extra passwords, and crucially that all security and governance controls are applied. Boards will register all users and have processes in place to control role based access, ensure that clinicians access ECS/KIS appropriately and audit users.

No secondary uses of ECS/KIS are permitted and any requests for data for research, audit, review etc should be through appropriate data extraction systems.

I hope this does clarify the access arrangements and safeguards in place to protect the data.

Yours sincerely

*Harry Burns*

**HARRY BURNS**