The combination of giving consent to both "Share Out" and "Share In" is a bit like having a door with a bolt on both sides-you need to have the door unlocked on both the inside and out in order to be able to open it. So for example:

Imagine a patient receives care from 3 different services; a GP, a district nurse and a smoking clinic. They want the GP and the nurse to share information with each other and know their progress at the smoking clinic. But they DON'T want the smoking clinic to see any of their other medical information.

In this example the patient would have consented to Share Out at all 3 services, but only providing consent for Sharing In at the GP and the District Nursing services and not the smoking clinic.

Health professionals and staff working within your GP practice and care services are legally bound to comply with NHS Codes of Practice for Confidentiality, Information Security and the Data Protection Act (1998) and can only access your information if they have a legitimate reason to do this.

A consent form must be completed to indicate your medical record sharing preference. This form is available from your GP Practice, Care Service or Health Professionals.

There may be times where, by law and where it is in public interest we would share information without your consent, for example:

- To protect children and vulnerable adults
- For the health and safety of others
- Where a formal court order has been served upon us
- In order to assist the Police in the prevention and detection of serious crime.





SystmOne

Enhanced Data Sharing Model (eDSM) patient Leaflet

What is SystmOne?

SystmOne is a computer system that GPs and other people looking after patients can use to record medical information and other relevant information discussed at your time of contact. Not everyone uses this particular system, but many GPs and Community Health services in area use this system to record patient notes.

What is your Care/Medical Record

Your medical record contains notes taken during every consultation you have had with a doctor or nurse at your practice or community service. Your record is also likely to include copies of any letters you have written and notes relating to any phone calls made with the service that you have been in contact with. Your record will also contain copies of letters from other hospitals and departments, including mental health assessments if you have ever had one. The time period covered by your electronic medical record can vary from one GP practice to another, but detailed information extending right the way back into your childhood may be included. All of this information is sometimes known as "your Detailed Care Record"

Enhanced Data Sharing Model within SystmOne

A facility is now available in this system which allows your Detailed Care Record to be shared between clinicians and others in different care services, who are involved with your care. This cannot normally happen without your permission and there are a series of strict 'consent procedures' that staff must follow if they want to share information about you, or to see information that another service has recorded. If you give consent, your care record held by your GP practice or medical service will be shared with other medical services involved in your care (such as: district nursing, health visiting, physiotherapy), who use the same system. This will provide health professionals with a better view of your whole healthcare.

Consent, Private Entries & Share in Share out Concept

When you are seen in your general practice, clinic or at home, you will be asked if you would like to share your full detailed care record with other medical service involved in your healthcare. This will include everything that is described in the section above.

So a clinician would ask something like:

Do you consent to the data that is recorded about you here being made available the other services that currently care for you and use SystmOne, as well as any other SystmOne service you may use in the future?

This is described as sharing out and is where you can give permission for the team you are seeing to potentially make the information they have recorded about you available to others.

It is possible for certain entries in your detailed care record to be marked as Private Entries, and in this situation it will only be that service which entered the information that can view these.

The second concept is gaining consent to Share In, and the clinician might ask a question along the lines of:

Do you consent to allow this service to view information about you that has been recorded at other services where you also received care?

This is the Sharing In concept, and this is where you can give permission for the team you are seeing to access the information that you have previously agreed to be made available (through the Sharing Out method outlined above)