

# Humber, Coast and Vale GP Connect assurance for use standards

## Version 0.1

### 1.0 Overview

This document sets out the minimum expected standards GP Practices in Humber Coast and Vale (HCV) must comply with in the use of GP Connect.

GP Connect is a national technology solution, delivered through NHS Digital (NHSD) that allows health and care organisations and authorised clinical staff to share and view GP practice clinical information as well as the direct booking of GP appointments from NHS 111, to improve patient care. Further information is available on the GP Connect Webpage <https://digital.nhs.uk/services/gp-connect> or by contacting the GP Connect team at [gpconnect@nhs.net](mailto:gpconnect@nhs.net)

The roll out of GP Connect in Humber, Coast and Vale will support our GP practices in meeting the new GP Contract requirement to enable NHS 111 to book appointments direct with GP practices by 31 March 2020.

A full list of organisations who are sharing data using GP Connect will be maintained on the HCV website: <https://humbercoastandvale.org.uk/how/digital-futures/>

A **GP Connect Information Sharing Statement**, setting out the legal basis for the information sharing and explaining the information sharing principles that GP practices will be required to adhere to, needs to be in place and approved by the six HCV CCGs for each separate purpose GP Connect is used for. These statements are included on pages 4-6 of this document.

GP Practices will be sent the GP Information Sharing Statement for each Use Case and they will be informed that by configuring their clinical system to enable the data sharing through GP Connect they are agreeing to the terms of the GP Connect Information Sharing Statement.

The **legal basis** for information sharing for all of the GP Connect Use Cases is Direct Care.

For the processing of personal data:

Article 6.1 (e) of GDPR: processing is necessary for the performance of a task carried out in the public interest or in exercise of official authority vested in the controller.

For the processing of 'Special Category Data':

Article 9.2 (h) of the GDPR: processing is necessary for the purposes of preventive or occupational medicine, for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care system and services.

## **2.0 Purposes GP Connect will be used for (Use Cases)**

In HCV, we will be using GP Connect for the following purposes:

- 1) NHS 111 Direct Booking between NHS111 (YAS) and GPs and GP Record Access for Urgent Care Clinicians in NHS111 in read-only format
- 2) Appointment Booking and Data Sharing between Practices within a Primary Care Network

For each purpose (or Use Case) a GP Connect Information Sharing Statement will be completed and approved by the Data Protection Officers of the six HCV CCGs prior to implementation.

## **3.0 Information Governance Assurance for the use of GP Connect**

All Health and Care organisations processing personal and special categories of personal data using GP Connect must:

- 1) Be registered as a Data Controller with the Information Commissioners Office;
- 2) Have submitted a successful Data Security and Protection Toolkit to demonstrate assurance that they are practising good data security and that personal information is handled correctly; adhere to high standards of information governance; and undertake annual Information Governance Training as part of their mandatory training requirements;
- 3) Comply at all times with data protection legislation and Codes of Practice;
- 4) Publish a Privacy Notice on their website and communicate to their patients, details of the purposes information is being shared for via GP Connect;
- 5) Sign up, if applicable to appropriate information sharing agreements supporting the processing of personal information through GP Connect;
- 6) Contribute, as required to Data Protection Impact Assessments (DPIAs) for the processing of personal information through GP Connect;
- 7) Only use GP Connect for authorised and approved purposes supporting Direct Care;
- 8) Follow Caldicott and Data Protection principles to ensure that only the minimum amount of identifiable data necessary is used at all times;
- 9) Ensure that access to GP Connect is granted to only authorised users within their organisations, controlled through role-based access protocols and adheres to NHS Standard Security Arrangements for access and transfer of data; and
- 10) Confirm their acceptance of these requirements.

## **4.0 GP Connect Information Sharing Statement**

The elements of a GP Connect Information Sharing Statement are:

- 1) The Purpose of Data Sharing:
- 2) Organisations Involved:
- 3) Legal Basis for Data Sharing and Processing:

- 4) Data Items Shared:
- 5) Who Will Be Able to View Data?
- 6) Data Retention:
- 7) Conditions of Use:

## **5.0 Monitoring and Review**

This document will be reviewed on an annual basis, and whenever a GP Connect Use Case is changed or developed.

The review date for this document is April 2021.

## GP Connect Information Sharing Statements

### HCV Statement 1

#### **The Purpose of Data Sharing:**

Data is shared in order to enable Direct Booking between NHS111 (YAS) and GP Practices in HCV and to enable Urgent Care Clinicians to see a view of the GP Practice record in read-only format. The GP Practice Record Access for Urgent Care Clinicians in NHS111 will support better clinical decision-making about patient need, resulting in more appropriate action and referrals.

#### **Organisations Involved:**

Yorkshire Ambulance Service

All of the GP practices in Humber, Coast and Vale

#### **Legal Basis for Data Sharing and Processing:**

##### For the processing of personal data:

Article 6.1 (e) of GDPR: processing is necessary for the performance of a task carried out in the public interest or in exercise of official authority vested in the controller.

##### For the processing of 'Special Category Data':

Article 9.2 (h) of the GDPR: processing is necessary for the purposes of preventive or occupational medicine, for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care system and services.

#### **Data Items Shared**

For appointment booking functionality: patient name and demographic details. The GP Connect solution will surface appointment slots that GP practices have configured to be available to the consuming organisation.

For Record Access: a view of the GP Practice clinical record in read-only format, including information about allergies, encounters, medications, observations, problems and procedures.

#### **Who Will Be Able To View Data?**

Data will be available to appropriate staff within each organisation controlled by each organisations access policy.

- NHS 111 Call handlers from or other administrative staff will not be able to view a patient's record but will be able to book appointments where appropriate
- GP Record Access is only enabled for the clinician role within the Integrated Urgent Care Service – NHS 111.
- At a GP Practice level necessary patient-level data will only be accessible to authorised clinicians and administrative staff with a justified purpose.

## OFFICIAL

### **Data Retention:**

Data will be retained in accordance with the Records Management Code of Practice for Health and Social Care 2016.

### **Conditions of Use:**

- Data will only be used for the purposes outlined in this statement.
- All parties will comply with data protection legislation and the Caldicott Principles (and other relevant statutory requirements and guidance) to protect confidentiality.

### **HCV Statement 2**

#### **The Purpose of Data Sharing:**

Data is shared in order to enable Direct Appointment Booking between HCV GP Practices in a Primary Care Network and an Extended Access Hub (where applicable) and to enable Practices in a Primary Care Network and Extended Access Hub to access the full patient record for patients with whom they have a legitimate relationship for Direct Care purposes only.

#### **Organisations Involved:**

All of the GP practices working as part of a Primary Care Network and Extended Access Hub (where applicable) in Humber, Coast and Vale

#### **Legal Basis for Data Sharing and Processing:**

##### For the processing of personal data:

Article 6.1 (e) of GDPR: processing is necessary for the performance of a task carried out in the public interest or in exercise of official authority vested in the controller.

##### For the processing of 'Special Category Data':

Article 9.2 (h) of the GDPR: processing is necessary for the purposes of preventive or occupational medicine, for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care system and services.

#### **Data Items Shared:**

For appointment booking functionality between GP practices in a Primary Care Network and Extended Access Hub: patient name and demographic details. The GP Connect solution will surface appointment slots that GP practices have configured to be available to the consuming organisation

For record viewing: full patient record will be accessible for Direct Care purposes only between GP practices working within a Primary Care Network and an Extended Access Hub (where applicable)

#### **Who Will Be Able To View Data?**

## OFFICIAL

## OFFICIAL

Data will be available to appropriate staff within each organisation controlled by each organisations access policy.

At a GP Practice level necessary patient-level data will only be accessible to authorised clinicians and administrative staff with a justified purpose and where there is a legitimate relationship between the Practice and the patient.

### **Data Retention:**

Data will be retained in accordance with the Records Management Code of Practice for Health and Social Care 2016.

### **Conditions of Use:**

- Data will only be used for the purposes outlined in this statement.
- All parties will comply with data protection legislation and the Caldicott Principles (and other relevant statutory requirements and guidance) to protect confidentiality.

OFFICIAL

## Appendix 1 – What is GP Connect?

GP Connect is a service that will allow care organisations and authorised clinical staff to share and view GP practice clinical information, data and appointments between clinical IT systems, quickly and efficiently. This will make sure patient medical information is available to clinicians when and where they need it, improving patient care. Further information can be found at the GP Connect Webpage <https://digital.nhs.uk/services/gp-connect> or contact the GP Connect team at: [gpconnect@nhs.net](mailto:gpconnect@nhs.net)

The GP Connect programme is supporting the development of capabilities which will enable the different systems to communicate, so that clinicians in different care settings can access patient data for the purposes of direct care and organisations can have access to book appointments at GP practices.

- **Access Record:**
  - HTML view – a static view, similar to a screen shot, sometimes referred to as ‘HTML view’
  - Access to a webpage view of a GP Patient record. This view includes a detailed summary view of the record, as well as additional information about allergies, encounters, medications, observations, problems and procedures
  - This supports hub working by enabling the detailed patient record to be shared regardless of GP system used
  - Other care settings can also access information where agreements are in place.
- **Appointments Management:**
  - Gives the ability to view, book, cancel and amend appointments between different GP Systems.
  - The GP Practice can choose which slots and type of slots are available for booking by different organisations
- **Access Record:**
  - Structured data (medications and allergies data) – Access to structured Medications and Allergies information from the GP Patient Record that can be imported into a different clinical system.
  - Medications and allergies are being prioritised as the most valuable information for the majority of clinical interactions
  - Additional structured information will be added over time.
- **Writeback:**
  - Systems can automatically send a consultation summary back to the patient’s registered practice in the form of a PDF document, detailing the consultation and actions taken

## Appendix 2 – Technical Overview of the GP Connect service

GP Connect services can be accessed by an authorised NHS clinician (or administrator) via their clinical system, when it is required to support the direct care of that patient.

GP Connect enables a clinician to access patient information in real time by requesting the information - via their clinical system - from the patient's registered GP practice, where the information is held. GP Connect also allows a clinician and authorised staff to manage appointments by enabling appointment information to be requested from another clinical system. The requesting clinician (or administrator) may be in another practice, an acute hospital, 111 call centre, or other care setting.

The GP Connect Service utilises two main Spine components to securely transfer messages between clinical systems:

- The Spine Secure Proxy (SSP) – this is used to transfer patient record (HTML and Structured) and Appointment Management capabilities,
- The Message Exchange for Social Care and Health (MESH) – this is used for the Messaging capability.

The GP Connect Service also relies on two main Spine components to provide prerequisite information to the Consumer systems so they can send messages to the right organisations:

- PDS (Personal Demographic Service) – all GP Connect Consumer systems must use PDS to obtain a patient's NHS number, date of birth and registered practice,
- SDS (Spine Directory Service) – all GP Connect Consumer systems must use SDS to obtain details about the target GP provider organisation

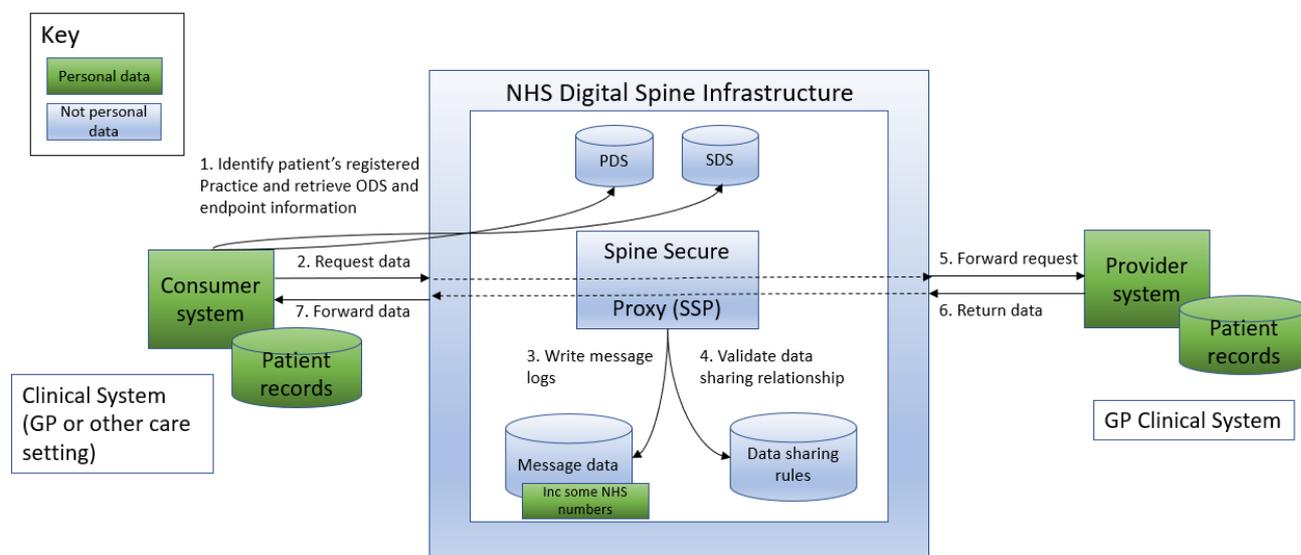
## **Appendix 3 - Data Flow Diagrams**

The topography diagram (figure 1) below shows the flow of messages when the SSP is utilised for transferring requests for patient record and appointments information. The flow can be described as follows:

- A request for information is raised in the Consumer system (the clinical system used by the clinician or administrator),
- The consumer system then uses two NHS Digital Spine components, PDS and SDS, to identify the patient's registered practice and build an endpoint that will direct the message to the patient's registered practice (NB - appointment requests can be made to other practices or hubs),
- The request is then sent to the SSP where the request is validated,
- If the validation is successful, then the request for information will traverse NHS Digital Infrastructure and the Provider System (the clinical system for the patient's registered GP practice) will receive the request and return the appropriate information via the Spine Secure Proxy to the Consumer system.

Whilst NHS Digital is delivering the GP Connect service, its role in the end-to-end flow of information is minimal, being limited to the use of the SSP and MESH for message validation

and transfer. The main constituent parties involved in GP Connect are the Provider and Consumer Systems.



**Figure 1 – Technical Architecture of the GP Connect Service using the SSP (HTML, Structured and Appointment Management capabilities)**

The second topography diagram (figure 2) below shows the flow of messages when MESH is used to transfer messages back to a patient's registered GP practice. The flow can be described as follows:

- A clinician completes a consultation with a patient and writes a summary of the consultation to send to the patient's registered practice which results in a message being constructed, which includes a PDF describing the consultation,
- The MESH client at the federated practice sends the message to the MESH server where it awaits collection by the registered practice,
- The MESH client at the registered practice collects the message from the MESH server and makes it available to other registered practice system components for onward processing
- The message is processed at the registered practice, usually this will result in a task being created in the practice workflow,
- Once received the receiving system will send back an infrastructure acknowledgement to say the message has been received, and then a business acknowledgement will then be sent once the message has been processed by the receiving practice.

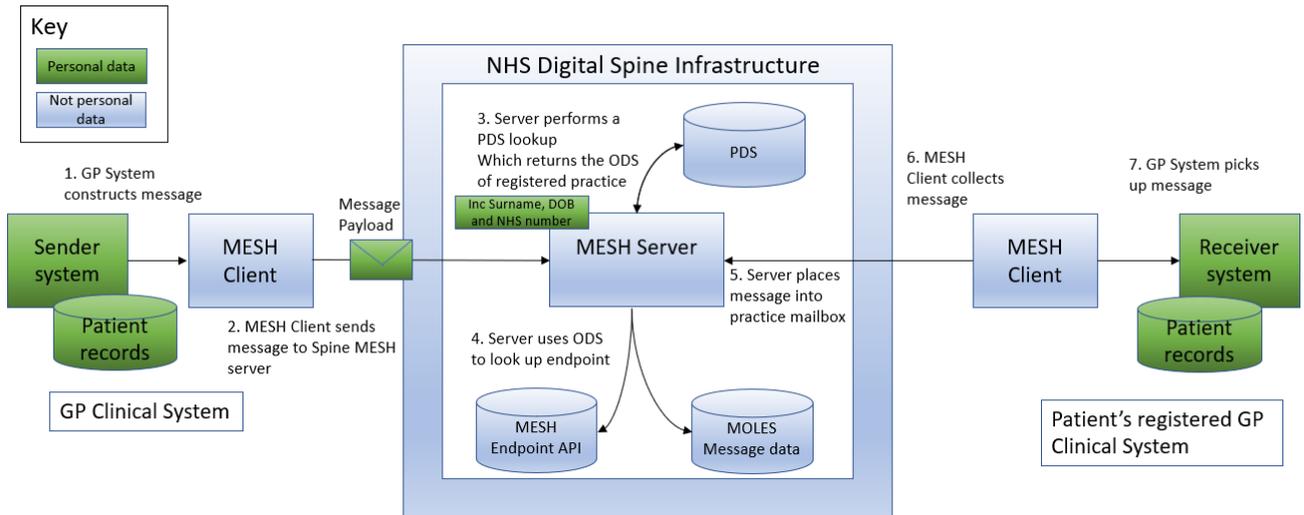


Figure 2 – Technical Architecture of the GP Connect Service using MESH (Messaging capability) note that MOLES is the audit data repository of MESH