April 2007

How the NHS Care Records Service (NHS CRS) will affect you as a healthcare professional or practitioner

“The key benefit for health professionals and practitioners will be having the right information, at the right time, in the right place. The introduction of the NHS CRS provides an opportunity to question old traditions, re-visit the way we work and review old practices. We have a ‘duty of care’ to ourselves and to our patients to ensure that all the benefits are realised. The benefits of sharing a single accurate record amongst all relevant staff caring for the patient are enormous.” Jan Laidlow, national clinical lead for allied health professionals and care group manager with special responsibility for pathology at Southampton University Hospitals NHS Trust

There has been concern amongst some clinicians and members of the public regarding the introduction of the electronic patient record, particularly around access to records, and patient confidentiality. The NHS CRS guidance has been developed to address some of these concerns and explain how the system will operate, for example the stringent security measures. I encourage you to take time out to read the guidance and understand the NHS CRS, and the future benefits it will deliver for both you and your patients.

What the changes will mean

The benefits to the professions are many. Over time, as the NHS CRS is introduced, a podiatrist seeing a patient for the first time, for example, will be able to use the system to access appropriate elements of the patient’s records immediately such as diabetic history. Medication and treatment can be discussed in an informed and professional manner using complete patient information, and the patient’s questions about this and any previous consultation answered more fully.

Another example is the Picture Archiving and Communication Service (PACS) where x-ray and other images and reports are instantly accessible. This allows staff working in, for example physiotherapy out-patients to view images in the presence of patients, avoiding the previous need to order hard copies of films and then have a further appointment in order to discuss findings with the patient.

Pharmacists will be able to dispense medicines with a better knowledge of the patient’s condition and medical history. For example, they will be able check on a patient’s test results, and in some cases view reasons for admission and currently prescribed medication.
Community-based allied health professionals may see the most significant benefits. For many of you, the NHS CRS will bring access to IT for the first time. A key change will be the ability to update your own notes and communicate instantly with your team, or with other teams treating the patient. The result will be a true multi-disciplinary care pathway. You will also have access to an email account which is secure and can be used to communicate information to your team and other colleagues and to neighbouring trusts and GPs.

The NHS CRS will, over time, enable more effective working across disciplines and reduce the isolation for those working in the community by being connected in real time to their colleagues. Community staff for example would receive alerts about patients being admitted to hospital or discharged, reducing the number of failed visits.

It will deliver better, safer and more efficient care. Health care records will be easily shared between authorised health professionals and time spent chasing results will be reduced, allowing more time to deliver care.

Once the NHS CRS is fully operational, ambulance crews will be able to access the record of a patient they are treating to obtain details of current medications, adverse reactions, allergies, medical conditions, recent history or consultations which will be invaluable in helping the crew make the correct referral.

The NHS CRS will make it easier to contact previous clinicians for more detailed information and people with complex needs will not have to ‘tell their story’ to many different professionals, reducing duplication as well as administrative delays. Information about a patient will only be entered once. This information can then be sent through to other health care professionals as an instant referral, reducing time involved in chasing paperwork, making telephone calls, consulting with our colleagues and mistaken referrals. Easy access to test results and documentation will mean a huge reduction in duplication of patient information.

These benefits will not happen over-night, but staff and patients will notice gradual and steady improvements over the next few years, as the new service is introduced.

Please be assured that the Programme will continue to consult with healthcare professionals and practitioners to ensure that your views and experience are taken in account during the design, building and testing of the IT software that is being introduced throughout England. Clinical engagement at all levels within NPfIT will ensure that the software is fit for purpose and meets clinical need.

Jan Laidlow
National Clinical Lead for AHPs
Care group manager with special responsibility for pathology
Southampton University Hospitals NHS Trust
The guidance is supported by the following professional organisations and bodies.

Ambulance Services Association
British and Irish Orthoptic Society
British Association and College of Occupational Therapists
British Association of Art Therapists
British Association of Drama Therapists
British Association of Prosthetists and Orthotists
British Dietetic Association
British Paramedic Association
Chartered Society of Physiotherapy
College of Operating Department Practitioners
College of Radiographers
Royal College of Speech and Language Therapy
Royal Pharmaceutical Society of Great Britain
Society of Chiropodists and Podiatrists