Summary Care Record with additional information

1. What is the Summary Care Record (SCR)?

1.1. The SCR is an electronic patient record containing up to date key information from the patient’s GP record. The core SCR dataset present in all records is:

1) Allergies and adverse reactions to medication
2) Current repeat medication
3) 12 months of acute medication (or 6 months if stated)
4) 6 months of discontinued repeat medication (unless otherwise stated)

1.2. SCRs can also contain additional information beyond the core dataset, where patients provide their explicit consent for this to happen. This may include:

1) Reason for Medication (displayed alongside the relevant core medication item)
2) Significant medical history (past and present)
3) Significant procedures (past and present)
4) Anticipatory care information e.g. concerning management of long term conditions
5) Communication preferences – as per the SCCI1605 dataset
6) End of life care information – as per the SCCI1580 dataset
7) Immunisations

2. Interpreting the SCR

2.1. The SCR is marked with the last date: time that an update was sent by the GP practice. A warning message will be displayed if the SCR has been newly created or the patient has recently changed their GP practice, because the SCR might not yet be fully up to date.

2.2. The SCR is sourced from the patient’s GP record only. Therefore, it may not include the entire list of the patient’s over the counter medications or items prescribed outside of the GP practice, unless these are recorded in the GP system. These items will be labelled on the SCR (under Type) as ‘Prescribed Elsewhere’.

For further information or to request support: scr.comms@hscic.gov.uk
2.3. If the patient has consented to additional information, it will appear below the core SCR, grouped under headings (known as Care Record Element (CRE) headings)

2.4. A heading only appears in an individual SCR if there is relevant information available from the patients GP record for inclusion under that heading. When headings are included they always appear in the order shown above.

2.5. The data included in the SCR consists of coded items from the GP system (mapped to SNOMED codes) together with supporting free text. There is no standard for the recording of supporting free text and its quality will vary, but when present in the SCR it generally provides additional useful detail to supplement the coded information.

2.6. **Resuscitation Information** in the SCR:

- Only the most recent instance of the Resuscitation (Do Not Attempt Cardio-pulmonary Resuscitation - DNACPR) codes from the GP system is displayed in SCR (and only if recorded in the GP system).
- This always appears under the **Personal Preferences** heading. If marked in the GP record as an active problem, then it also appears under **Problems and Issues**.
- Resuscitation status in the SCR is only to be treated as a signpost to information that is fully recorded elsewhere and viewers and clinicians are advised to continue to follow their existing processes according to local and national standards.

2.7. Items defined in the Royal College of GP’s sensitive dataset, specifically relating to in-vitro fertilisation, sexually transmitted diseases, terminations of pregnancy and gender re-assignment are not automatically included in the SCR, but can be manually added by the patient’s GP practice, if the patient wishes.

2.8. **Problems and Issues** is a special section that contains the patient’s active problems, where they have been identified as such in the GP system. Any items that appear under this heading will also appear under their respective defined headings as well e.g. Heart failure will appear in **Diagnoses**, but may also be under **Problems and Issues**.

2.9. Immunisations and/or vaccinations appear under the **Treatments** heading.

2.10. **Investigations** and **Investigation Results** only contain manually added items or items recorded in specific relevant sections of the GP record.

2.11. There are differences in the underlying GP record format, supplier implementation, local data quality and patient preferences. As a result, the content of SCRs with additional information will vary from record to record but will follow a consistent presentation format. However, viewers should be aware that the SCR may not include all the information pertinent to the patient.

Further information can be found at [http://systems.hscic.gov.uk/scr/gppractices/additional](http://systems.hscic.gov.uk/scr/gppractices/additional) and any questions can be sent to the Health and Social Care Information Centre (HSCIC) SCR team at scr.comms@hscic.gov.uk.