The Health and Social Care (Safety and Quality) Act 2015: Consistent Identifier

1. Purpose

The Health and Social Care (Safety and Quality) Act 2015 (see Appendix 1) includes a requirement for health and adult social care organisations to use a consistent identifier (the NHS Number) for all data sharing associated with or facilitating care for an individual; and

2. What does the Health and Social Care (Safety and Quality) Act 2015 do?

The new provisions require that the NHS Number be used across health and adult social care providers as a unique and consistent identifier. This has been a policy requirement for a number of years and reflects an information standard that should have also been enforced by NHS standard contracts, but the new provisions provide a further mandate with statutory force. It is not an absolute requirement and does not require those without access to the NHS Number to use it, nor for them to do so where this would require unreasonable effort, but where the requirement can be met it is a legal requirement to do so.

The Health & Social Care (Safety & Quality) Act 2015 also introduces a new legal duty to share information where this may be likely to facilitate the provision to the individual of health services or adult social care in England, and is in the individual’s best interests. This duty is the subject of separate IGA guidance and its impact upon sharing the NHS Number is covered in associated IGA Frequently Asked Questions (FAQs).

3. The NHS Number

The NHS Number is the national, unique identifier that makes it possible to share patient and service user information across the NHS and social care safely, efficiently and accurately. This short guide is prepared to help Information Governance staff and managers in making local decisions on sharing the NHS number.

Every individual registered with the NHS in England and Wales has a unique NHS Number. In 2012 an NHS Standard was developed for its use. In summary, the standard strongly recommends that care organisations use the NHS number for all patients and clients, to display the NHS number on electronic screens and to include it in paper and electronic communications. It is an administrative number and has nothing to do with entitlement to care.

In 2014 NHS England launched a programme to support system-wide adoption of the NHS Number to enable delivery of integrated care and integrated digital care record systems. This means that the NHS Number is being implemented in new care contexts and as a result there are uncertainties and concerns as to how it should be handled. The rules on the use of the NHS Number are explained in a separate IGA guide.
Appendix 1

Health and Social Care (Safety and Quality) Act 2015: Consistent identifiers

In Part 9 of the Health and Social Care Act 2012 (health and adult social care services: information), after section 251 insert—

251A Consistent identifiers
(1) The Secretary of State must by regulations specify a description of consistent identifier for the purposes of this section.
(2) “Consistent identifier” means any identifier (such as, for example, a number or code used for identification purposes) that—
   a. relates to an individual, and
   b. forms part of a set of similar identifiers that is of general application.
(3) Subsection (4) applies if—
   a. a relevant health or adult social care commissioner or provider (“the relevant person”) processes information about an individual, and
   b. the individual is one to whom a consistent identifier of the description specified under subsection (1) relates.
(4) If this subsection applies the relevant person must include the consistent identifier in the information processed (but this is subject to subsections (5) to (8)).
(5) Subsection (4) applies only so far as the relevant person considers that the inclusion is—
   a. likely to facilitate the provision to the individual of health services or adult social care in England, and
   b. in the individual’s best interests.
(6) The relevant person need not comply with subsection (4) if the relevant person reasonably considers that one or more of the following criteria apply—
   a. the relevant person does not know the consistent identifier and is not reasonably able to learn it;
   b. the individual objects, or would be likely to object, to the inclusion of the consistent identifier in the information;
   c. the information concerns, or is connected with, the provision of health services or adult social care by an anonymous access provider;
   d. for any other reason the relevant person is not reasonably able, or should not be required, to comply with subsection (4).
(7) This section does not permit the relevant person to do anything which, but for this section, would be inconsistent with—
   a. any provision made by or under the Data Protection Act 1998, or
   b. a common law duty of care or confidence.
(8) This section does not require the relevant person to do anything which the relevant person is required to do by or under provision included in a contract by virtue of any provision of the National Health Service Act 2006 (and, accordingly, any such requirement is to be treated as arising under the contract, and not under this section).”