

Working across health and care



- Yesterday we talked about:
 - the importance of team working in the NHS
 - the different roles people have
 - whether this should limit the access they have to patient's information
- We were reminded that anyone working as a health or care professional is subject to **strict rules** to keep personal health information **secure and confidential**, and to use it appropriately.
- Today we are talking about **joining-up information** across health and care settings.

The health and care team

- Involves a number of other administrative and professional roles including:
 - Registered Social Workers
 - Care Assessors
 - Care Home Managers
 - Nurses and Nurse Associates
 - Care Workers
- Staff in those teams **need to know about you** to deliver effective care. But people should **only see what is relevant** to the task they need to do for you.
- Joining-up health and care information does not mean letting everyone see everything.



What information is important?

- Standardising access to **certain information for different roles** can facilitate safer, more efficient care.
- As a GP, I sometimes need care workers to know information **about how or when to administer a person's medication** as part of their care plan.
- This is different to the information I might receive in a hospital discharge summary, which might include the **reason for hospital admittance, treatment or procedures in hospital and a list of medication.**



What are the trade offs?



- It can be difficult to define **what information is relevant** for every different role.
- How do we balance people's **right to privacy** with the need for professionals to **communicate effectively** about their care?
- Are professional **obligations** adequate **protection**?
- Should we differentiate between roles?
- If so, how much differentiation do we need to maintain **public trust**, whilst maintaining **efficiency** for staff and safety for patients and service users?