

# SOUTH WEST LONDON HCP – INTEROPERABILITY PROGRAMME

## OPT-OUT PROCESS – IOP1

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## Requirement

As part of the Connecting your Care Privacy Notice Campaign communications in support of Phase 1 of the SWL Interoperability programme, it is necessary to ensure that patients and the public are given the opportunity to discuss the implications to them of sharing information between providers and to opt-out of information sharing should they wish to do so. To support this a number of actions must be taken:

- The opportunity to opt-out of information sharing must be made available and advertised to the public (the Privacy Notice Campaign)
- The Privacy Notice Campaign must run for an agreed period before information sharing can commence – a duration of 8 weeks has been agreed with each CCG within the STP
- The opt-out process must be clear and readily accessible not only to the patient, but also to anyone in a location where a patient/member of the public has a question about data sharing
- The process around managing the technical opt-out must be defined and managed both in the short and longer terms.

The communications to support the Privacy Notice Campaign have been produced and validated by the SWL IG Working Group. Version 1 of the opt-out process was defined and ratified by the SWL IG Working Group in July 2018 and approved (with the addition of an email provision for the submission of forms and queries) by the IOP1 Project Board (01 August 2018). As roll out planning progressed with each CCG a suggestion has been made that will streamline the process, agreed at the IG WG, and is hereby updated in this version.

The following assumptions, dependencies, constraints and safeguards have been identified.

## Assumptions

1. That opt-out forms will be accepted via mail (FREEPOST), and via email as scanned objects
2. That we will provide a central email address for submission of opt-out forms and general enquiries
3. That we will provide a FREEPOST mail address for the return of forms
4. That a secure SharePoint site will be established to store scanned and saved copies of opt-out forms and the opt-out log
5. That the SharePoint will support document management versioning, and that the opt-out log will be managed accordingly
6. That appropriate training in how to use the document management function within the SWL SharePoint will be made available to those users given access if required
7. That for IOP1 the Nominated User will likely be the GP Engagement Lead for the CCG roll out, but that this may change as the project progresses
8. That post-phase 1 roll out, this role will be reviewed and incorporated into a more central function as part of BAU
9. That once the 3 HIEs are connected via the LHCIE the technical support function undertaken by each HIE support team can be transferred to a central BAU role, along with the management of the opt-out requests from the public and the privacy notices management as described above

10. That a log may be kept as a record of users who have opted out for audit purposes, even where no permission is given to contact the patient/service user directly. For example, a patient/service user complains data is being shared/not being shared inappropriately – evidence that an opt-out form has been submitted and actioned should be available.

## Dependencies

1. That ongoing funding will be made available for a FREEPOST address
2. That SWL Project Support Office resources will be assigned to manage the administration function around received opt-out forms and enquiries, to include the management of paper and electronic forms, and responding to received calls via a managed voicemail
3. That external team members from other organisations (in the first instance Nautilus Consulting, and the SWL CCG staff members) can be given reliable access to the SWL SharePoint folder.

## Constraints

That in Phase 1 the system configuration to “do not share” must be undertaken by the HIE support team from the acute trust to which the CCG has been aligned. However, once the 3 HIEs are connected via the London Cerner Health Information Exchange this role can be consolidated into an SWL support function, as described in assumption 9 above, and the SWL support users given access to Cerner Millennium to make the change directly.

## Safeguards

1. That in Phase 1 the Nautilus Project Lead will (in her role as Roll Out Lead) check the SharePoint folder weekly to ensure that forms are being actioned by the appropriate users
2. That communications between the Project Support Office (PSO) and the HIE back office teams must be shared by secure email only (NHS Mail)
3. That whilst it has been agreed that there is no requirement to seek individual verification for opt-out requests, there is a requirement to demonstrate that due diligence has been undertaken in regard to processing the application. As such, it is noted that the following controls have been defined:
  - a. the opt-out form must be signed
  - b. that if someone is requesting to opt-out a child or dependent their relationship and status in regard to the child/dependent is indicated on the form
  - c. that the change may not be made in Cerner Millennium where the demographic details provided in the form do not match those of the identified patient record as they are recorded in PDS
  - d. that a letter is sent to the named person at the address provided confirming their request has been completed and stating that if they did not make the request or that it has been made in error to contact us (email), or, where details cannot be verified, stating so and asking the patient/service user to contact us directly.

## End to End Process

1. Patient/Service User collects leaflet/form from provider location such as GP/acute trust, or downloads form from web page
2. Patient/Service User completes form and returns by post to: Freepost SWL CONNECTING YOUR CARE, or scans and returns via email to: [connectingyourcare@swlondon.nhs.uk](mailto:connectingyourcare@swlondon.nhs.uk)
3. SWL PSO received processes form:
  - identify CCG to whom patient/Service User is aligned (check Consolidated GP Practice list)
  - add person details, date form received, consent to contact status and CCG to opt-out log on SharePoint
  - scans and saves form to SharePoint folder
  - shreds paper form
4. Consent to contact given:
  - PSO
    - sends email to CCG Nominated User via NHS mail with patient name, and contact details
    - updates log with date CCG Nominated User emailed
  - Nominated User
    - contacts patient/service user
    - answer queries
    - discuss benefits of sharing/potential impact of not sharing
    - agrees status (continue to opt-out/abort opt-out)
    - sends email to PSO with update from conversation (continue to opt-out/abort opt-out)
  - PSO
    - updates opt-out log with outcome of contact
5. Patient opt-out proceeds
  - PSO
    - submits opt-out request form to appropriate HIE provider application support service desk via secure email
  - HIE provider application support team
    - log service desk call and allocate call number
    - search Millennium via web browser
    - record found, and details validated
      - switch to “no sharing”
      - close service desk call and notify PSO action complete
    - record not found/details not validated
      - no change made to HIE
      - close service desk call
      - email/notify PSO opt-out not completed as details not found/could not be verified
  - PSO
    - sends appropriate letter to Patient/Service User (opt-out complete/opt-out cannot be processed)
6. No consent to contact/patient/service user – proceed as per step 5 above.

## Timelines:

- Receipt of form, logging to SharePoint - 2 days
- Review and action by Nominated User where permitted – 3 days
- Contact client/service user - 3 days (two attempts then progress to submit form)
- Action form by Acute HIE – (non-urgent service request) – 5 days
- PSO sends status letter with opt-in/re-verify details – 2 days
- Form received to log closed – max 15 working days.

## Process by User

### Patient/Service user

1. Pick up form from health locality – or download from online link
2. Complete form and return via freepost or scan and return to SWL email address
3. Indicate on form if happy to be contacted to discuss choices – and if so, receive call
4. Confirmation letter received once service ticket closed, with details as to how to opt back in if change mind in future (or if change not processed due to discrepancy in demographic details).

### Project Support Office:

1. Form received
2. Date received stamped to form
3. Details entered into opt-out log - saved to SharePoint
4. Form scanned to secure folder on SharePoint
5. Paper form shredded
6. Form submitted securely to HIE application support helpdesk
7. Notified by HIE application support helpdesk that call is closed (action complete/could not be completed)
8. Letter to Patient/Service User confirming action complete/not complete, and any supporting information (re-submit if details not verified/how to opt back in if opt out complete?)
9. Update opt-out log with outcome and date letter sent.

### Nominated User (e.g. GP Engagement Lead)

1. Receive email from PSO with Patient/Service user contact details
2. Contact Patient/Service User (2 attempts)
3. Notify PSO of outcome of contact.

### HIE Application Support Team

1. Copy of opt-out request form received from PSO
2. Call logged, and service desk number generated
3. Call actioned (Patient search in web-browser/details found and verified/HIE sharing option deselected/call closed)
4. Notify PSO outcome of call – actioned/not actioned.

## Opt-out process flow

