

# Summary Care Record

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## Project method

The Summary Care Record (SCR) is an electronic record of key clinical information from a patient's GP record. As a minimum it contains information about medications, any known allergies and adverse reactions. Last year in England 2.5 million episodes of care were better informed by healthcare staff viewing the SCR with the patient's permission. Additional information (significant medical history; information about the management of long term conditions; immunisations; and particular care needs and communication preferences) can be added to the record with explicit consent. Vulnerable patient groups such as those with dementia or with detailed and complex health problems will particularly benefit from having this additional information in their SCR, and we are working closely with the NHS England Learning Disabilities team. On the HSCIC SCR website there is guidance and considerations for those patients who lack the capacity to consent.

## Project results/evaluation

There are videos, animations, case studies, factsheets, and storyboards available which describe the wide variety of ways that the SCR has already made a difference to direct care.

## Project area classification

Hospital care	x	Emergency care	x
GP care	x	Dementia	x
Social care		Learning disability	x
Voluntary sector		Other mental health	x
Financial services		Palliative care	x
Police		Advance planning, LPAs	x
Legal		Commissioning	
Community health care	x	Training	
Nursing and care home		For professionals?	x
Acute care	x	For public and service users?	
Chronic care	x		