



Department of Health

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The Rt Hon Tom Brake MP
House of Commons
Westminster
London SW1A 0AA

From the Rt Hon Jeremy Hunt MP
Secretary of State for Health

Richmond House
79 Whitehall
London
SW1A 2NS

020 7210 4850

Dear Tom,

Thank you for your letter of 29 September about the transfer of medical records between GP practices.

NHS England manages the Primary Care Support Services (PCSS) contract with Capita, which started on 1 September 2015, replacing a number of diverse local arrangements. Over the next two years this is intended to transform the way services are delivered to make them more consistent, efficient, reliable, and ultimately better for end users, such as GP practices. In April, Capita introduced changes to the way medical records are moved between practices, and difficulties with embedding these changes have led to some of the concerns raised.

Capita is currently piloting a new system for moving medical records in the West Yorkshire area. This involves placing records that need to be moved into individual bags with a tracking label. The records are collected and delivered either direct to the receiving practice or into long-term storage, and can be fully tracked and traced. This aims to improve the speed and security of the transfer process, and will enable practices to track the records through an online portal. Capita is gathering feedback during the pilot, and this new process will be rolled out to the rest of the country when the pilot has successfully concluded.

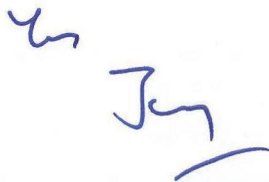
For practices outside West Yorkshire, Capita has introduced a weekly records collection and delivery service with the national courier City Sprint. Records need to be placed and sealed into individual shipping bags, but tracking labels are not being used until the pilot has successfully concluded. The records are collected and taken to PCSS (Capita) offices in Darlington and Preston for processing and onward delivery to the final destination. This process is similar to the one that was previously in place, where practices provided the records to a local courier, who took

them to a local PCSS office for processing. There was no tracking of the records through this process. Capita has worked with NHS England to ensure that appropriate information governance arrangements are in place during this phase, prior to rolling out the full service.

This interim process does take longer, meaning that the volumes of records practices have been receiving may not be at their expected levels. Capita has made significant investments to improve performance and there should now be an increase in processing speeds.

Capita is issuing regular updates to GP practices to keep them informed of the current process, to notify them when tracking labels will be introduced, and to provide answers to other frequently asked questions.

NHS England and Capita are committed to monitoring the impact of improvements, and NHS England will continue to hold Capita to account for delivery of quality primary care support services under the contract.



JEREMY HUNT