

SCCI2112 Female Genital Mutilation Risk Indication System (FGM RIS) - Local System Integration Implementation Guide

Published 19 October 2016



Information and technology
for better health and care



This information standard (SCCI2112) has been approved for publication by the Department of Health under [section 250 of the Health and Social Care Act 2012](#).

Assurance that this information standard meets the requirements of the Act and is appropriate for the use specified in the specification document has been provided by the Standardisation Committee for Care Information (SCCI), a sub-group of the National Information Board.

This information standard comprises the following documents:

- Requirements Specification
- Implementation Guidance.

An Information Standards Notice (SCCI2112 Amd 32/2015) has been issued as a notification of use and implementation timescales. Please read this alongside the documents for the standard.

The controlled versions of these documents can be found on the [NHS Digital website](#). Any copies held outside of that area, in whatever format (e.g. paper, email attachment), are considered to have passed out of control and should be checked for currency and validity.

Date of publication: 19 October 2016



This information is licensed under the Open Government Licence v3.0. To view this licence, visit <http://www.nationalarchives.gov.uk/doc/open-government-licence/> or write to the Information Policy Team, The National Archives, Kew, Richmond, Surrey, TW9 4DU.

Glossary of Terms

Term / Abbreviation	What it stands for
Applicable IT system	In the context of this document an 'applicable IT system' refers to any electronic information system that supports the provision of NHS funded healthcare in all clinical settings, including general practices, in England that are accessed by children. In addition, an 'applicable IT system' will use a verified NHS number to link the patient to their electronic health record. The system must also have access to the national Spine either directly or via a Spine Mini Services Provider (SMSP)
ASID	Accredited System Identifier
CAP	Common Assurance Process
Child	A person under 18 years of age
DH	Department of Health
DMS	Domain Message Specification
EIS	External Interface Specification
FGM	Female Genital Mutilation
FGM RIS	Female Genital Mutilation Risk Indication System
NHS Digital	NHS Digital is the new name for the Health and Social Care Information Centre (HSCIC).
IGSoC	Information Governance Statement of Compliance
NHS Spine	The Spine is a collection of national applications, services and directories that support the NHS in the exchange of information across national and local NHS IT systems
ODS	Organisation Data Service
PDS	Personal Demographics Service
RBAC	Role Based Access Control
SCCI	Standardisation Committee for Care Information
SCRa	Summary Care Record Application
The 'Service'	The FGM RIS central core component
Validated NHS number	A validated NHS number is one that has the correct format and passes the NHS number check digit calculation
Verified NHS number	A verified NHS number is one where the patient's identity has been cross-checked using demographic details on the Personal Demographics Service (PDS)

Contents

1	Introduction and Background	5
1.1	Purpose of the Information Standard	5
1.2	Scope of the Information Standard	5
2	About this document	6
3	Implementation plan and timetable	6
4	What is the FGM RIS?	7
5	Supporting Documentation	7
5.1	FGM RIS	7
5.2	FGM RIS core service (SCRa)	7
5.3	FGM RIS Local Integration – Implementation Plan	7
5.4	General FGM and safeguarding information	8
6	Monitoring Conformance Criteria	9
7	Information Governance	9
7.1	Access	9
7.2	Local Audit	9
7.3	Patient / Parent consent	9
7.4	Safeguarding Procedures and Processes	10
8	Local Storage	10
9	Risks and Issues with suggested mitigations	10
10	Pre ‘Go Live’ Checklist	11

1 Introduction and Background

The Female Genital Mutilation Risk Indication System (FGM RIS) is a national IT service (England) and has been developed as part of the Department of Health (DH) FGM Prevention Programme.

The FGM RIS delivers the capability to share key information as to whether a girl (under 18) is at risk of FGM. This information is not currently available to healthcare professionals where a girl presenting is not known to that organisation, for example in unscheduled care settings. The FGM RIS addresses this concern and will, over time, mean that when a girl is at risk of FGM, the FGM RIS will support clinicians throughout the NHS to meet their local safeguarding responsibilities in preventing the girl from undergoing FGM. In this way, this Information Standard supports the overall objectives of the wider DH FGM Prevention Programme to eradicate the practice of FGM in this country within a lifetime.

The FGM RIS 'core service' is part of the NHS Digital National Spine and includes:

- A central repository to store FGM risk information for girls under 18.
- Functionality in the Summary Care Record application (SCRa) to allow authorised healthcare professionals to add and remove FGM risk information from the central repository.
- An integration capability to allow information held within the central repository to be viewed by authorised healthcare professionals by allowing a '**view only**' capability within local NHS applicable IT systems.

1.1 Purpose of the Information Standard

The purpose of the Information Standard is to help integrate healthcare more closely into statutory safeguarding processes, supporting effective early intervention and ongoing safeguarding of girls potentially at risk of FGM.

The Information Standard only relates to the FGM RIS '**integration capability**' and requires that local NHS 'applicable IT systems'¹ alert authorised healthcare staff when a girl patient is potentially at risk of FGM (as held on the FGM RIS core service).

1.2 Scope of the Information Standard

The scope of the Information Standard covers all NHS funded healthcare providers in England and their local NHS IT systems. It applies to all clinical settings that are accessed by children and funded by the NHS. Services accessed exclusively by adults are excluded as are any services that rely on anonymity for their success (such as sexual health clinics and addiction services). The Information Standard requires that all 'applicable IT systems' are integrated with the FGM RIS core service within these settings.

The FGM RIS will provide FGM risk information to support local decision making processes undertaken by NHS healthcare professionals. The information will only indicate that a *potential* FGM risk exists for the girl and not the full details as to the reason the FGM risk indicator was set, therefore, the use of this information needs to be used in conjunction with any existing processes to safeguard the girl from undergoing FGM.

The following information is shared via an automatic alert message to authorised health care professionals when a current risk of FGM exists for a girl patient on FGM RIS:

¹ See glossary for definition of "applicable IT system"

- That the girl is potentially at risk of FGM.
- The date and time the FGM risk assessment was undertaken.

2 About this document

The purpose of this document is to provide guidance and references to all NHS funded healthcare providers and their IT system suppliers to support implementation and use of this Information Standard.

Section 5.3 of this document provides detailed steps on how local sites can work together with their suppliers to implement this standard.

3 Implementation plan and timetable

The success of this Information Standard is dependent on clinicians updating the FGM RIS core service, via the SCRa, when they assess a girl as at potential risk of FGM. This capability has been available nationally since August 2015 and uptake is being facilitated by the DH FGM Prevention Programme with several 'early implementers' already updating the FGM RIS. The intention is to have a near complete FGM RIS national database available for the first local systems integrating by March 2017.

The implementation of the FGM RIS Local System Integration (this Information Standard) will run in parallel to the uptake of updating the FGM RIS core service and will be synchronised with those areas where updating the FGM RIS core service has been adopted. This will bring immediate benefits to those organisations implementing this Information Standard.

Once the Information Standard is published, further engagement with NHS funded healthcare providers and their NHS IT system suppliers will take place to drive implementation and achieve local integration in NHS IT systems with full conformance by March 2019.

The current plan is to have, by February 2017, six to seven early adopter sites of FGM RIS local system integration. This will include GP practices and trusts.



It is the intention that as more clinicians start to use the FGM RIS to record when a girl is at potential risk of FGM, local NHS system integration will become a higher priority for NHS IT system suppliers in order that their users can realise the benefits of sharing the FGM risk information held on the FGM RIS core service.

4 What is the FGM RIS?

The FGM RIS is an overarching term used to describe all the elements of the FGM RIS service. This includes:

- The 'core service' (part of the National Spine):
 - A central repository to store FGM risk information for girls under 18.
 - Functionality in the Summary Care Record application (SCRa) to allow authorised healthcare professionals to add and remove FGM risk information from the central repository.
 - A messaging capability to allow local NHS IT systems to query the FGM RIS central repository allowing a '**view only**' capability within local NHS IT systems.
- 'Local integration' – the use of the messaging capability (provided in the 'core service') by local NHS IT system suppliers to provide an automatic alert message within local NHS IT systems to alert users when a girl under 18 is at risk of FGM (as recorded in the 'core service').

5 Supporting Documentation

All documents will be available on the NHS Digital FGM RIS web pages at:
<http://content.digital.nhs.uk/fgmris>

5.1 FGM RIS

An overarching FGM RIS User Guide has been produced to help clinicians understand what the FGM RIS is, it's different components, and how to use it to help prevent FGM:

- FGM RIS User Guidance

5.2 FGM RIS core service (SCRa)

An implementation toolkit is available to help organisations implement and use SCRa to update FGM RIS information. This includes the following guides:

- FGM RIS SCRa User Guide
- FGM RIS SCRa Implementation Guide
- FGM RIS SCRa Quick Reference Guide

A communications toolkit is also available for local printing by organisations using the FGM RIS. This includes the following leaflets:

- FGM RIS Patient Leaflet
- FGM RIS Staff Leaflet

5.3 FGM RIS Local Integration – Implementation Plan

This document is provided to help the NHS funded healthcare providers such as local Trusts, hospitals and GP practices to adopt this information standard. Below are the steps which the implementing organisation will need to follow in order to successfully implement this standard. These are established as a result of the programme team working with the early implementer trusts and learning from their experience:

- The local trust makes a decision to implement the standard. The recipient of the ISN must ensure that all relevant contacts are notified in the following areas: Information

- Governance, ICT, the PAS, other Clinical Systems Administrators, Training, Safeguarding, and Risk Management and the relevant system suppliers.
- You will need to consider if the Caldicott Guardian needs to be notified.
 - The nominated person within the implementing organisation such as a local trust works with their internal IT and local system suppliers and the safeguarding lead to commence the work to implement the standard. This nominated person can be a business manager, project lead or whoever the trust deems is responsible for carrying out this role.
 - It is also important that this person works closely with the business manager or a change lead to assess the impact of this change on their local processes. They will also need to review their existing safeguarding processes to see how the indicator alert will fit within existing processes.
 - Once they have established the key roles and responsibilities including a potential project lead, the nominated person will work together with their local system suppliers to make them aware of the change and the need to implement the standard.
 - They will then work together to develop a plan to make the necessary changes to the local system to comply with the standard.
 - The business manager/ change lead will also need to communicate and inform local staff of the changes including providing awareness and training as necessary.
 - They need to identify any training and development for local staff.

The following documentation is provided as part of this Information Standard to help NHS funded healthcare providers and their IT systems suppliers to implement the 'view only' capability within their local NHS applicable IT systems:

- FGM RIS Requirements Specification, available on the NHS Digital website: <http://content.digital.nhs.uk/isce/publication/scci2112>
- FGM RIS Domain Message Specification, available on the Data Developer Network: <https://data.developer.nhs.uk/fhir/fgm-v2-draft-d/Chapter.1.About/index.html>
- FGM RIS Implementation Guide (this document), available on the NHS Digital website: <http://content.digital.nhs.uk/isce/publication/scci2112>

5.4 General FGM and safeguarding information

- DH Female Genital Mutilation Risk and Safeguarding: Guidance for Professionals (March 2015): <https://www.gov.uk/government/publications/safeguarding-women-and-girls-at-risk-of-fgm>
- Health Education England is producing eLearning materials for the wider DH FGM Prevention Programme. An introductory module on FGM for all health professionals can be found at: <http://www.e-lfh.org.uk/programmes/female-genital-mutilation/>
- Female Genital Mutilation Act 2003: <http://www.legislation.gov.uk/ukpga/2003/31>
- HM Government Multi-agency statutory guidance on female genital mutilation (April 2016): <https://www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation>

- DH Commissioning services to support women and girls with female genital mutilation (March 2015):
<https://www.gov.uk/government/publications/services-for-women-and-girls-with-fgm>
- Information Sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (March 2015):
<https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>
- Children Act 2004: <http://www.legislation.gov.uk/ukpga/2004/31/section/11>

6 Monitoring Conformance Criteria

The DH FGM Prevention Programme will be responsible for conformance monitoring. The following information will be available to them:

- The number of end users integrated with FGM RIS can be determined from NHS Digital Deployment Issue Resolution Team.
- NHS England receives monthly reports showing the uptake of the FGM RIS core service, and the number of girls at risk of FGM per GP practice they are registered with. These reports can be used to analyse areas of high and low uptake and help plan where resources to help the FGM RIS local integration should be focussed.
- NHS IT systems suppliers may only gain access to the FGM RIS by going through the Common Assurance Process (CAP) or via an accredited Spine Mini Service Provider (SMSP).

7 Information Governance

7.1 Access

Access to FGM RIS information will be determined by each NHS funded healthcare provider locally although it is expected that all healthcare professionals that care for children will have access to the system.

7.2 Local Audit

The FGM RIS information as described is stored on the NHS Digital provided National Spine SCR application (SCRa). The data on the SCRa is access controlled and audited at a national level. There is no requirement for local systems to keep an audit of the records on the SCRa; however this is for local organisations to determine.

Guidance was sought from NHS Digital IG experts and the Information Governance Alliance (IGA) during the development of this standard. They referred to the “Records Management Code of Practice for Health and Social Care 2016” which all local sites should adhere to and ensure their systems meet the requirements, set out on page 31 of the Code of Practice, on Integrated Viewing Technology and Record Keeping. The link to the Code is <http://systems.digital.nhs.uk/infogov/iga/resources/rmcop>.

7.3 Patient / Parent consent

Patient/parent consent is not required to view the FGM risk information held on the FGM RIS core service. It is accepted that information sharing is vital to safeguarding and promoting the welfare of the girl. A key factor identified in many serious case reviews has been a

failure by practitioners to record information, to share it, to understand its significance and then take appropriate action.

7.4 Safeguarding Procedures and Processes

NHS funded healthcare providers will already have local safeguarding protocols and procedures for helping girls who are at risk of FGM. These should include sharing of information with multi-agency policies and procedures, consistent with those developed by their Local Safeguarding Children Board. This Information Standard does not replace existing safeguarding processes.

As part of this Information Standard, NHS funded healthcare providers are expected to review their current processes to include handling cases where FGM is alleged or known about or where there is a potential risk of FGM identified. NHS funded healthcare providers will need to determine how FGM RIS integration will be used within their safeguarding processes and ensure processes and procedures are updated accordingly. Local processes should include further assessment as to whether the girl is currently at risk of FGM. Conversely it should not be assumed that if no message is displayed the girl is not at risk of FGM.

8 Local Storage

As described, the outcome of the risk assessment is recorded in the FGM RIS that is in the SCRa that is itself held on the NHS Digital National Spine. The outcome will also be maintained on the FGM RIS system – for example when the risk assessment is reviewed and updated.

It is therefore important that local systems must not store the risk indicator data locally as this will mean that locally stored data may become out of date with the result that healthcare professionals may be inadequately informed or even misinformed. For this standard, the data controller is NHS Digital as the data is held on the National Spine. Approval of local storage would mean that the data controller would have to pass to the local area and this is not the intention of this standard.

This should not be confused with healthcare professionals maintaining a record of actions and decisions they may take as a result of seeing the risk indicator; nor any records that have been created as part of the process of establishing the risk indicator. However this is not within the scope of this standard.

9 Risks and Issues with suggested mitigations

As part of implementing this Information Standard organisations should consider identification of risk and issues and ensure that appropriate mitigations are in place.

The FGM RIS project has identified a number of potential risks and issues together with some suggested mitigations. NHS funded healthcare providers should consider the list below to determine whether the risk / issue applies to them and, if so, how they will be owned, managed and mitigated within the organisation. Please note this list is not exhaustive and the mitigations provided are only examples and you should come up with your own mitigations against the risks identified:

- Poor uptake of recording FGM risk information on the FGM RIS core service – DH is driving the implementation activities and is working with early adopter sites to implement the FGM RIS.

- Presumption that there is no risk if an alert is not displayed – this is not correct. This may be the girl's first presentation at a significant event or the presentation where a risk assessment is done. There may be a system error in which case an error is logged which the local system administrators have access to so they can take appropriate action to resolve the error.
- FGM RIS is not used across full health community - DH is driving the implementation activities and is working with early adopter sites to implement the FGM RIS.
- Wrong girl is identified as at risk – this risk is minimised as a full risk assessment is carried out on a girl before an indicator is added to the RIS.
- Role Based Access Codes not given to all relevant clinicians – all relevant clinicians will need to use NHS issued smart cards with the correct RBAC code. This will be part of the local implementation plan and clinical safety assessment.
- Presumption of high level of risk when risk displayed – awareness and training is available for all clinicians and local staff to help them understand more about FGM and the risks associated.
- Staff unaware of safeguarding procedures and responsibilities – all local establishments have a dedicated safeguarding lead who is responsible for ensuring staff are kept up to date on any safeguarding issues.

10 Pre 'Go Live' Checklist

Please complete this checklist before the FGM RIS Local System Integration 'Go live' date and before organising any training:

- ✓ Who is leading the implementation of Local Integration?
- ✓ Do you need IG sign off for the Local Integration implementation to go live?
- ✓ Which section/ people within the organisation will have access to the FGM RIS Local Integration Systems?
- ✓ Do you have smartcard readers in place?
- ✓ Do all users have a smartcard?
- ✓ Does the smartcard have the appropriate authentication code and has this been tested?
- ✓ Have all users been trained on what to do when they see the alert? (It is recommended that this is the final step).