

DCB2112 Amd 28/2019 FGM-IS Local System Integration Change Specification

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Data Coordination Board

This information standard (DCB2112) has been approved for publication by the Department of Health and Social Care 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 Data Coordination Board (DCB), a sub-group of the Digital Delivery Board.

This information standard comprises the following documents:

- Change Specification
- Requirements Specification
- Implementation Guidance.

An Information Standards Notice (DCB2112 Amd 28/2019) 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.

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Glossary of Terms

See Requirement Specification.

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1 Overview

This document describes the changes associated with this release of the information standard. Details on the purpose, background and context of the standard are shown in the supporting Requirements Specification.

2 Summary

Standard	
Standard Number	DCB2112
Standard Title	Female Genital Mutilation - Information Sharing (FGM-IS) – Local System Integration
Description	<p>This information standard requires in-scope NHS funded healthcare providers to update their local applicable IT system(s) to automatically display an alert message when a patient with female genitalia under 18 years old has a family history of FGM, as recorded in the FGM-IS core service (a national Spine application). The search undertaken to display the alert is made of all genders, to cater for any patient adopting a new gender identity, and all patient records that have this flag will be displayed. This ensures all are treated fairly and no additional risk is created, as is required by the Equality Act 2010¹.</p> <p>The decision to update the FGM-IS core system with a family history of FGM is a local clinical decision, informed by the individual personal circumstances and supported by the NHSE/I guidance for clinicians on FGM prevention alongside local FGM prevention protocols.</p> <p>An ‘applicable IT system’ is the term used to describe those local NHS IT systems to which this standard applies and includes any electronic information system that supports the provision of NHS funded healthcare for in-scope clinical settings in England that are accessed by children. At this time it is only mandatory for those systems working in primary care settings.</p> <p>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).</p> <p>This information standard describes the integration of the FGM-IS information held on the NHS Spine within in-scope clinical settings to support the clinician with improved access to information of those under the age of 18 with a family history of FGM, which informs local safeguarding procedures.</p>

¹ <http://www.legislation.gov.uk/ukpga/2010/15/contents>

	<p>It supports the overall objectives of the DHSC and NHSE/I FGM prevention work in that it is expected to:</p> <ul style="list-style-type: none"> • support clinicians to meet their local safeguarding responsibilities • support the prevention of FGM, through the provision of accurate information to all relevant care professionals • improve the awareness of FGM • eventually help to eradicate the practice. <p>This information standard forms part of the national solution across England so that whenever and wherever the child is provided with health care, a family history of FGM will be known which will lead to better outcomes for children at risk of FGM in society.</p>
Applies to	<ul style="list-style-type: none"> • Mandatory requirement for primary care NHS funded healthcare providers • Optional (may implement) requirement for other NHS funded healthcare providers (local decision)
Release	
Release Number	Amd 28/2019
Release Title	Version 2
Description	<p>Provision of an automatic alert in local NHS IT systems (applicable IT systems) when a family history of FGM has been previously recorded on the FGM-IS core service. Note that previously this alert indicated a patient's risk of FGM but following a change in the FGM-IS service this now indicates a patient's family history of FGM.</p> <p>This release makes the following changes:</p> <ol style="list-style-type: none"> 1. name change to Female Genital Mutilation Information Sharing (FGM-IS), rather than FGM RIS (Risk Indication System) 2. mandatory implementation requirement for primary care only and an optional requirement for other care settings, rather than all NHS funded services being in-scope 3. allows the local storage of the family history indicator if it is associated with a clear date and time stamp indicating when FGM-IS indicator was retrieved from the core FGM-IS system. <u>Local storage, which is not a mandatory requirement (or the default approach)</u>, may be used for example to record the status of the flag in historical records (the 'as at' position). Notes: (i) as per the initial release of this standard the indicator must only be presented up to age 18, and (ii) local storage has information governance consequences (see implementation guidance, section 7) regarding data controller. Previously local storage was not allowed. 4. requirement to display FGM-IS for any patient regardless of NHS system classification of gender identity.
Implementation Date	This information standard gives notice to NHS funded primary care healthcare providers in England and those that manage NHS IT system supplier contracts to achieve compliance by 31 March 2021.

	Implementation should commence immediately following publication of this standard.
Full Conformance Date	31 March 2021

2.1 Scope

2.1.1 In-Scope

This information standard is **mandatory** (MUST implement the requirements described in section 3) for primary care NHS funded healthcare providers in England:

- GPs and other users of primary care systems, such as practice nurses and community midwives.

It is **optional** (MAY be implemented, depending on local decision) for other health care providers in England.

Note:

- An evaluation is underway regarding FGM-IS use in hospital settings, which may lead to future mandate if there is a clear business case.
- Until this evaluation is completed NHS services will be able to use the SCRA to create, view and amend records (without local view integration).

2.1.2 Out of Scope

The purpose of this information standard is to integrate healthcare more closely into statutory safeguarding processes. As such, this information standard does not apply to local authorities / social care settings which already have well established processes in place.

Services accessed exclusively by adults are also excluded from this information standard as are any services that rely on anonymity for their success (such as sexual health clinics and addiction services).

The following are out of scope of the requirements of this information standard:

- Functionality of the FGM-IS core service contained within the national spine architecture. This includes the functionality available in SCRA such as the addition and removal of the FGM-IS Indicator.
- Professional safeguarding responsibilities which are guided by national and local policy; NHS funded healthcare providers are responsible for determining how the FGM-IS information will be used.

2.1.3 Related Standards

Ref #	Reference	Title
1	ISB 0149	NHS Number
2	SCCI2026	Female Genital Mutilation Enhanced Dataset

3 Changes to the standard

1. Rename the standard Female Genital Mutilation - Information Sharing (FGM-IS)

Justification

The sharing of information between clinical professionals within the child's life is key to eradicating FGM practices. Renaming the standard aligns it with the wider FGM programme of work and overarching safeguarding concerns. In 2017, the FGM Prevention Programme maintained dialogue with clinicians regarding implementation and concerns arose with regard to the risk assessment element being ambiguous. In agreement with the Royal College of General Practitioners (RCGPs) the system was changed to FGM - Information Sharing (FGM-IS), moving away from an assessment of risk to an indicator of a family history of FGM.

2. Mandation of primary care providers. Optional requirement for other providers.

Justification

This is to allow improved work planning and prioritisation of funding, and will ultimately achieve full compliance, at which point a review can be undertaken of progress and consideration of next priority area for implementation.

Please note, this is a temporary reduction in-scope only to focus on primary care integration and pending a review of longer-term plans for secondary care integration to take place during 2020. Secondary care services already using integrated FGM-IS services should continue to do so.

3. Allow local systems to store the FGM family history indicator when a clear date and time stamp is included indicating when the data was retrieved from the core FGM-IS system.

Justification

Allows local system interaction with the SCRa to be reduced whilst providing clinicians with an indication as to the timeliness of the information presented and whether the SCRa needs to be consulted for more timely information.

A new event on the local system (such as a new patient attendance) presents the clinician with the latest family history of FGM held on the FGM-IS core service.

4. Expansion of FGM-IS integration display to include all genders

Justification

The requirement has changed to ensure that all genders who have an FGM-IS flag are displayed on the integrated system (previously other genders would not have shown).

This is to ensure that any patient adopting a new gender identity is not unfairly treated nor left at risk. Any disclosure of a transgender status in such an instance would be for medical purposes, allowed under Section 22 of the Gender Reassignment Act 2004.

Please note, if there is no FGM-IS flag then there will be no information on the integrated system, regardless of gender identity.

4 Issues and Maintenance

To support the implementation of this information standard any persistent issues should be fed back to the standard's developers. Feedback will be used by the developers for future development and to improve implementation of the standard. Send feedback to enquiries@nhsdigital.nhs.uk (please include 'FGM-IS information standard' in subject line).