BSACP
BRITISH SOCIETY of
ABORTION CARE PROVIDERS

Position Statement

The Single Patient Record (as proposed in Clause 52 of Health Bill 2026) and abortion care

BSACP position

The British Society of Abortion Care Providers believes that an opt-out approach to the Single patient Record, supported by robust confidentiality safeguards and meaningful patient control, should be properly evaluated alongside opt-in arrangements before a legislative approach is determined.

Background

British Society of Abortion Care Providers (BSACP) is a multidisciplinary society to promote best practice, education, training, and research in abortion care.

BSACP welcomes efforts to improve the integration, safety and continuity of healthcare through the development of a Single Patient Record (SPR). The proposed SPR would bring together information from different healthcare providers into a shared electronic record, enabling healthcare professionals to access relevant information to support patient care.

As the Health Bill progresses through Parliament, amendments have been proposed that would require patients to explicitly opt in before information about abortion, contraception and sexual health services could be shared through the SPR.

BSACP recognises the importance of protecting patient confidentiality, particularly where disclosure of sensitive information could place individuals at risk of harm, including those experiencing domestic abuse or reproductive coercion. Robust safeguards governing access to records, visibility through the NHS App and patients' control over disclosure are essential. However, a blanket opt-in requirement for abortion information could reinforce the stigma and exceptionalisation of abortion care, perpetuate fragmentation of medical records within and across healthcare services, and undermine continuity and safety of care. It could also limit opportunities for monitoring outcomes, learning from clinical practice and improving services.

BSACP believes that an opt-out approach, supported by robust confidentiality safeguards and meaningful patient control[1], should be properly evaluated alongside opt-in arrangements before a legislative approach is determined.

Such an evaluation should consider the implications of both models for patient safety, confidentiality, autonomy, continuity of care and service improvement.

Further evidence is needed about patients' understanding of, and preferences for, different approaches to information sharing. Care should be taken when using proxy measures of patient preferences, as decisions made in one context may not reflect preferences about information sharing within the SPR.

Meaningful patient and public involvement, including people with particular confidentiality and safeguarding needs, is essential to understanding patients' views and evaluating the acceptability of different approaches.

BSACP calls for an evidence-informed approach to the development of the SPR that balances confidentiality and patient autonomy with the benefits of integrated healthcare.

Summary

BSACP believes that an opt-out approach to the Single patient Record, supported by robust confidentiality safeguards and **meaningful patient control**, should be properly evaluated alongside opt-in arrangements before a legislative approach is determined.

Abortion care should be integrated into mainstream healthcare without compromising patient safety, privacy or dignity.

BSACP calls for an evidence-informed approach to the development of the SPR that balances confidentiality and patient autonomy with the benefits of integrated healthcare.

References

Health Bill 2026
https://bills.parliament.uk/publications/67726/documents/8780#sec_52

[1] "Meaningful patient control" should include the statutory right for any patient in any setting to opt out of having their information included in, or shared through, the Single Patient Record.