

| NHS | Programme Director: Jonathan Cameron | Version:1.0 |
|----------|---|--------------|
| SCOTLAND | | Date:18/4/13 |

Approvals:

This document must be reviewed and approved by the following

| Name | Signature | Title / Responsibility | Version |
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| | | National Information Systems Group (NISG) | |

Related Documents:

These documents will provide additional information on KIS.

| Ref no | Doc Reference Number |
|--------|--|
| UG190 | PCS Scotland Key Information Summary.doc |

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2. What is KIS?

The Key Information Summary (KIS) is an enhancement of the existing Emergency Care Summary (ECS) and a potential partner to the Electronic Palliative Care Summary (ePCS). Where ePCS provides functionality to provide palliative care details to out of hours (OOH) care providers, KIS is intended to improve the level of information available to care providers during the OOH period, for patients with more varied conditions. Some patients may move on from KIS to ePCS later as their care needs change. In EMIS PCS, KIS can only currently be applied to regular registered patients. Although this is subject to patient consent, the KIS arrangements allow clinicians to override consent status, if making some information available to OOH care providers is in the best interests of the patients or the safety of the public.

3. Known issues KIS

The purpose of this document is to highlight areas of the system that will be improved with release B (PCS Scot 2013 release B) currently being rolled out across Scotland and also issues we know of that will be addressed in future releases.

| lssue ref | Description | Page number | Release ref |
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| 3.24 | KIS decision to upload date | 10 | •• |
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| 3.27 | KIS searches and reports bug | 11 | •• |

Index of Known Issues to date:

 Issues 3.1 – 3.3 were identified by pilot practices and are addressed in release B which is currently being rolled out across Scotland.

Issues 3.23 – 3.27 were identified during testing and are currently under review.

••These items are subject to discussion with National Services Scotland.

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3.1 Patient aware - can't edit following Consent change.

Detail: Patient awareness data wrongly displaying on the KIS summary screen when the patient's consent status changes. If a patient initially does not give their consent for the KIS but the clinician decides to send it to OOH the clinician is forced to enter data relating to the patient's awareness; this is in line with the requirements. If the patient changes their mind at a later date and they decide to give their consent all the data in the [Patient aware?] fields is greyed out & can't be edited. This is not an issue but the fact that this information is displayed in the summary once the record is saved is an issue because it gives the impression to the user that this data will be sent to OOH.

This is addressed in release B currently being rolled out across Scotland.

3.2 Access Info - should not be blank

Detail: Enforce entry of data in the Access Information section free text fields. If the user has ticked the [Key Holder] or [Address Instruction] check boxes they should be forced to enter data into the corresponding free text fields. Without information in these fields the 'true' value sent to OOH for either of these data items is meaningless.

This is addressed in release B currently being rolled out across Scotland.

3.3 KIS Agencies - unable to edit.

Detail: You can't edit Agency data in the [Agencies] window of ePCS that was entered via the [KIS Data Entry] window within the KIS. If a code that is not available in ePCS is entered via the KIS it is not possible to edit it in ePCS in fact it doesn't even appear in the ePCS summary screen.

This is addressed in release B currently being rolled out across Scotland.

3.4 It is not possible to create a KIS with a consent status of 'Unknown'.

Detail: Requirement KIS-06-02 states 'The user will be able to create records using one of five possible consent statuses for each patient: KIS Consent status unknown'

This is a bug which will be fixed in release E due to start roll-out in September 2013.

3.5 Editing KIS adds additional entries into patients record If you edit a text field in the KIS the system adds a second entry for the associated item to the patient's record.

Detail: If a patient's circumstances change or the clinician wants to amend an input error they will need to edit the KIS data. Although the system edits the data within the [KIS Data Entry] window it actually adds a full new entry to the patient's record while keeping the original entry. Eg. I edited the value in the [Patient's Emergency Contact Number] field twice I noticed that there were 3 entries for the 'KIS, emergency or alternative contact numbers' in the KIS Summary screens. A similar issue occurs with Read coded items except that only the latest value appears in the KIS summary screens but a second entry is added to the patient's record.

This is addressed in release E due for roll out in September 2013.

3.6 Confusing text on consent screen

Detail: (KIS) On consent screen. Text 'Patient Aware?' is confusing. After recording 'no consent' you are only recording further data if you are overriding consent. Text should be 'Override Consent?', and then you are recording the decision to override along with the KIS record. The following wireframes illustrate how this will look in future releases with a pick list for consent status and reasons for consent being overridden.

| 0 - Consent 1: Demographics 2: Current Situation 3: Care & Si | | × |
|--|---|------------------------------|
| 0 - Consent 1: Demographics 2: Current Situation 3: Care & Si | upport 4: Resuscitation & Preferred Place of Care | 5: ePCS |
| KIS Upload Decision | | |
| Send a Key Information Summary for this patient | Last updated | |
| Do not send a Key Information Summary for this patient | // | |
| Patient Consent | | |
| T dtent Consent | Last updated Notes | |
| KIS Consent status unknown | // | |
| | Date not uploaded to KIS | |
| Legal requirement | | |
| | | |
| Risk to self | | |
| | | |
| Risk to others | | |
| Special Notes (Shared with ePCS Screen) | | |
| Apply Special Note | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Apply Expiry Date Special Note will expire on / / | | (22 of 2048 characters used) |
| KIS Review Date (Practice Use Only) | | |
| KIS Review Date | // | |
| | | |
| | | Ok Cancel |
| | | |
| KIS Data Entry | | × |
| 0 - Consent 1: Demographics 2: Current Situation 3: Care & S | | |
| | upport 4: Resuscitation & Preferred Place of Care | 5: ePCS |
| KIS Upload Decision | | 5: ePCS |
| KIS Upload Decision Send a Key Information Summary for this patient | Last updated | 5: ePCS |
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| KIS Upload Decision Send a Key Information Summary for this patient | Last updated | 5: ePCS |
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| KIS Upload Decision • Send a Key Information Summary for this patient • Do not send a Key Information Summary for this patient Patient Consent KIS Consent status unknown KIS Consent status unknown KIS Consent declined KIS Consent overridden – patient aware | Last updated Last updated Last updated Notes / / | 5: ePCS |
| KIS Upload Decision • Send a Key Information Summary for this patient • Do not send a Key Information Summary for this patient Patient Consent KIS Consent status unknown KIS Consent declined | Last updated / / Image: Constraint of the second secon | 5: ePCS |
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| KIS Data Entry | × |
|---|---|
| 0 - Consent 1: Demographics 2: Current Situation 3: Care & Sup | port 4: Resuscitation & Preferred Place of Care 5: ePCS |
| KIS Upload Decision | |
| Send a Key Information Summary for this patient Do not send a Key Information Summary for this patient | Last updated |
| Patient Consent | |
| | Last updated Notes |
| KIS Consent overridden – patient unaware | / / Date not uploaded to KIS |
| ☑ Legal requirement | |
| ✓ Vulnerable person | |
| ☐ Risk to self | |
| Risk to others | |
| Special Notes (Shared with ePCS Screen) | |
| Apply Special Note | |
| | |
| | |
| | |
| | |
| Apply Expiry Date Special Note will expire on 1/ | (22 of 2048 characters used) |
| KIS Review Date (Practice Use Only) | |
| KIS Review Date | // |
| | Ok Cancel |

Please note that these are wireframe representations of the KIS dialog and do not match exactly how they will look

This change will be made in release E due for roll out in September 2013.

3.7 ECS Consent Required for KIS to be Sent

We need to make it clear in the training notes that ECS consent must be given for a KIS to be sent to OOH (unless an override is included in which case only the Special Note will be sent). We need to add a comment to the ECS section of the KIS Summary to make this clear to users on screen. The screenshot below shows how the screen will appear to users:

| 📴 EM | IS PCS - LAN Edition (Nation | nal Services Scotland) | | l d 🗙 |
|--------------------|---|--|-------------|-------|
| File H | ielp | | | |
| Module | s Internet NPfIT M | essage organiser Protocols Patient Patient Protocols Patient Patie | Aberdeen (3 | • |
| E -Edit; R -Rep | Create 0 - All ort View I - Message Histor | 1 - Demographics 2 - Current Situation 3 - Care and Support 4 - Resuscitation M - Medicines A - Allergies C - Consultations ry G - Registration V - Values H - Full History | 5 - Summary | |
| Key Iı | formation Summary. | KIS Upload Decision : Yes Review Date : 11/04/2013 Last Updated : 10/04/2013 | | |
| | Consent | | | _ |
| | Patient Consent | KIS Data Entry | | |
| | 10/04/2013 | O - Consent 1 : Demographics 2: Current Situation 3: Care & Support 4: Resuscitation & Preferred Place Of Care ePCS | | |
| | 10/04/2013 | | | |
| | | Send key information summary (KIS) upload 🔹 10/04/2013 💌 | | |
| | 10/04/2013 | Patient consented ? | | |
| | Special Note | Dissent for key information summary upload 🔹 10/04/2013 💌 A comment | | -1 |
| | 10/04/2013 | Patient aware ? | | |
| | 10/01/2013 | Dissent for KIS upload overridden, patient aware I/10/04/2013 | | |
| | Demographic/Contact | Legal Requirement 10/04/2013 | | |
| | Personal Details | ▼ Vulnerable Person 10/04/2013 ▼ | | |
| | Sex | □ Risk to Self | | |
| | Surname | Risk to Others | | |
| | Forename | Special Notes (shared with ePCS Screen) The patient must consent to ECS before KIS information will be sent. Either amend ECS Consent to Send all KIS information | | |
| | Date Of Birth | Apply Special Note | | |
| | Telephone | This is a special note | | |
| | CHI Number | | | |
| | 10/04/2013 | | | |
| | | | | |
| _ | 0 | | | - 11 |
| | Carer Details Surname | | | |
| | Forename | Apply Expiry Date : Special Note will expire on 17/04/2013 🔻 (22 of 2048 characters used) | | |
| | Address | KIS Review Date (Practice Use Only) | | |
| | Postcode | Il/04/2013 ▼ | | |
| | Telephone Number | | | |
| | Relationship To Patient | | | |
| | Is Next Of Kin | No | | |
| | Special Information | Notes NOK note | | |
| | Access Information | | | |
| | 10/04/2013 | Key Holder Mrs Smith across the road | | |
| | 10/04/2013 | Address instruction Next to the bakery | | |
| | Key Professional Conta | cts Contact details | | ~ |
| | | NUM 0VR Wed 10 Apr 2013 11:21 Dr Prac Adminone @ National Information Systems (19930) (192.168.33.147) | | |
| - | start 👘 🧭 🖉 Nati | ional Information 🦉 KIS Data Entry 🖉 Information | CY 🔇 | 11:21 |

This issue was reported in testing and is under review for future releases.

3.8 KIS data entry (removal from the upload)/preferred place of care

In KIS all entries wherever possible are Read Coded and added to the patient's Medical Record. In view of this it is difficult then to update a patient's details should their circumstances change because we are not able to remove the Read Codes from their Medical Record for audit reasons. We have therefore had to create a set of 'Negation' Read Codes that effectively work as an equal but opposite code to those already used, which will act as a way of demonstrating that the previously added code no longer applies.

An example of this is in the area of preferred place of care. A clinician is able to add multiple places of care with a free text description providing specific details. So a patient's entry may look something like this in the KIS dialog:

| 1 - Concent 1 | 1: Demographics | 2: Current Situation | 3: Care & Support | A: Desuscitation & P | Preferred Place of Care | 5: Palliative Care | | |
|---------------------|-----------------|----------------------|-------------------|----------------------|-------------------------|--------------------|---|--------|
| | | 2. Our ent ortadion | | | referred ridde of oure | o. ruidave oure | | |
| | | | | | | | | |
| Date | Place | | Notes | | | | | Add |
| 05/11/2012 | Hospital | | Monday | | | | | Edit |
| 05/11/2012 | Nursing | home | Tuesday an | d Wednesd | ау | | - | Delete |
| 05/11/2012 | Hospice | | Thursday, F | riday, Satur | day and Sund | lay | * | |
| NACPR (Shar | red with ePCS) | | | | | | | |
| ONACPR Form | n Status Unknow | n | • | Start Date | Notes | | | |
| | | | | | | | | |
| YPADM (Sha | red with ePCS) | | | | | | | |
| CYPADM (Sha | ared with ePCS) | | | Agreed Date | Notes | | | |
| | ared with ePCS) | | | Agreed Date | Notes | | | |
| CYPADM (Sha None | ared with ePCS) | | v | | Notes | | | |
| | ared with ePCS) | | Ŧ | - | Notes | | | |
| | ared with ePCS) | | Ţ | - | Notes | | | |
| | ared with ePCS) | | Ţ | - | Notes | | | |
| | red with ePCS) | | v | - | Notes | | | |
| | red with ePCS) | | v | - | Notes | | | |
| | red with ePCS) | | × | - | Notes | | | |
| | red with ePCS) | | ¥ | - | Notes | | | |
| | red with ePCS) | | v | - | Notes | | | |

Please note that this is a wireframe representation of the KIS dialog and does not match exactly how it will look

This will be added to the patient's medical record as:

05/11/2012 8Ce3. Preferred place of care - hospital Monday

05/11/2012 8Ce4. Preferred place of care – nursing home *Tuesday and Wednesday*

05/11/2012 8Ce1. Preferred place of care – hospice Thursday, Friday, Saturday and Sunday

If the clinician wanted to delete the entry highlighted above in blue then they would hit the delete button, which would remove it from the dialog.

Since we can't delete entries from the patient's medical record an additional entry would be added of: 21/03/2013 EMISNQPR222 Preferred place of care no longer nursing home

This change will be made in release E due for roll out in September 2013.

3.9 Patient and carer details

Up to 10 telephone numbers in total can now be recorded for a patient.

This change will be made in release E due for roll out in September 2013.

3.10 Other Agencies Involved

Allow adding and updating records relating to other agencies that are providing care to the patient. This will be merged with the ePCS field for adding other agencies so that there is only one text box field covering nurses and other agencies. Multiple agencies can be listed and it will be possible to remove agencies from the upload.

This change will be made in release E due for roll out in September 2013.

3.11 Current Medication

New sections to be included on ECS for Medicines Prescribed Elsewhere, recorded using the "Where Prescribed" field with a default of "GP Practice" or "In Practice" for any item prescribed by the GP Practice.

This change will be made in release E due for roll out in September 2013.

3.12 Resuscitation and preferred place of care/DNACPR

This functional area will support the recording of data to support forms and records around patient's decision regarding resuscitation and associated free text. The start date (or date of onset) for the DNACPR status can also be recorded.

| D. Convert I Demographic 2: Convert Studion 3: Core & Bagort 4: Resuscitation & Preferred Proce or Core 5: ePCS Preferred Proce or Core Date Proce P | Preferred Place of Care Add Dote Place Notes OS/11/2012 Hospice Delete DNACPR (Shured with ePCS Screen) Start Date Notes DNACPR Form Status Unknown / / III IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII | KIS Data Entry | | | | | | | × | | |
|---|--|--|--|----------------------|-------------------|----------------------|-------------------------|---------|----------------------------|--|---|
| Date Place Notes Add 05/11/2012 Narsig home Image home Image home Image home 05/11/2012 Narsig home Image home Image home Image home 05/11/2012 Hospice Image home Image home Image home Image home 05/11/2012 Hospice Image home | Date Place Notes Add OF/11/2012 Narag home Image: Comparison of the state | 0 - Consent | 1: Demographics | 2: Current Situation | 3: Care & Support | 4: Resuscitation & F | Preferred Place of Care | 5: ePCS | | | |
| 05/11/2012 Nurang home 05/11/2012 Hospice 05/11/2012 Hospice DNACPR (Shared with ePCS Screen) Start Date Notes Notes DNACPR Form Status Unknown // IIII CVPADM (Shared with ePCS Screen) Agreed Date None // IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII | OS/11/2012 Hospital OS/11/2012 Narang home OS/11/2012 Hospice DNACPR (Shared with ePCS Screen) Start Date Notes Notes ONACPR Form Stabue Ukknown / / III CYPADM (Shared with ePCS Screen) Agreed Date None / / IIII KIS Date Entry X Or- Orment, 1 Demographics 2 Carrent Studuton, 3: Care & Support Preferred Place Notes OS/11/2012 Hospical OS/11/2012 Hospical OS/11/2012 Hospical OS/11/2012 Notes OS/11/2012 Hospical DNACPR (Shared with ePCS Screen) Add Edit Piece Notes Add DS/11/2012 Hospical DNACPR (Shared with ePCS Screen) Start Date DNACPR (Shared with ePCS Screen) Start Date DNACPR (Shared with ePCS Screen) Add DNACPR Form Dospical DNACPR Form Maread Date DNACPR Form Add DNACPR Form Agreed Date | Preferred P | lace of Care — | | | | | | | | |
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This change will be made in release E due for roll out in September 2013.

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3.13 CYPADM information

If either of the read codes 9K7 – "Children and young people acute deterioration management form" or 8CMN – "Has children and young people acute deterioration management plan" are present on the record then they will be sent as part of the KIS extract with any free text and the date that the CYPADM status was agreed, if present.

This change will be made in release E due for roll out in September 2013.

3.14 Agencies under wrong tab

The [Agencies] section should not be in the [Demographics] tab but in the [Care & Support] tab.

This change will be made in release F due for roll out in October/November 2013.

3.15 Adding a free text carer/key holder comment

- It is not possible to enter a free text comment against the carer when you first assign a carer to a
 patient in their KIS.
- You can't enter key holder data against the carer
- You can't enter key holder data against the next of kin.

This enhancement is under review for release F due to roll out in October/November 2013.

3.16 Text too large

When adding/editing in some free text descriptions it's possible to enter 3,291 characters into the [Descriptive text] field. If this item is then added to the patient's KIS only the first 254 characters are extracted. This has been identified as an issue in the following fields: Medical Record Comment, Patient aware, Emergency Number, DNACPR, Access Info, Self-Management Plan and Other Agencies Comment. This will be fixed with the label 'truncated text' inserted to denote that some information is not shown in KIS.

This is a bug which will be fixed in release F due to roll out in October/November 2013.

3.17 Inconsistency between consent managed for KIS and ePCS.

Detail: If ECS consent is given but KIS and ePCS consent are withheld the consent data for both are sent to OOH. However, if ECS consent is withheld only KIS consent data is sent, ePCS consent data is not sent.

This enhancement is under review for release F due to roll out in October/November 2013.

3.18 Inconsistent 'Data will not be sent' warning messages in KIS

There is an inconsistency in the trigger for warning messages that are displayed when some or all of the KIS is not sent to OOH.

This enhancement has been accepted for release F due to roll out in October/November 2013.

3.19 Allergies don't show in KIS summary screen

Detail: The allergy data should be included in the KIS summary screen so that user can easily see which data will be sent to OOH.

This enhancement has been accepted for release F due to roll out in October/November 2013.

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3.20 Edit Usual GP from KIS

Usual GP – The GPs felt it would be beneficial if this information could be amended from the KIS screens. This change is being investigated further and is under review.

3.21 ePCS tab should contain all ePCS fields

Detail: The GPs (who tested the system) stated that if this is to be used to replace the ePCS screens then it must contain all the GSFS dataset; at present it does not. E.g. The treatment data can't be entered from this tab. They are happy to issue it the way it is but only if all pilot sites are given clear instruction on this tab including that it doesn't contain all ePCS data.

This change is being investigated further and is under review.

3.22 Renaming of 9-ePCS heading in consultation mode to 8-KIS causes a problem in patient history.

Detail: (KIS) Renaming of the 9-ePCS heading in consultation mode to 8-KIS causes a problem in patient history. In MR on consultation screen all historic entries for ePCS done via consultation mode now display as KIS.

We are aware of this issue and it is under review (it will form part of the reorganisation of tabs).

3.23 KIS HTML Report

Can we display a note within the HTML KIS report that advises the reader that items in italics are **not** sent to the OOH service.

This issue was reported in testing and is under review for future releases.

3.24 KIS Decision to Upload Date

The 'decision to upload date' currently allows the clinician to backdate to the time the previous entry was made. This is incorrect and should default to today's date only, since the clinician is making the send decision there and then (even though the patient's consent may have changed in the recent past).

This issue was reported in testing and is under review for future releases.

3.25 Other Agencies List in ePCS

Historically the 'Other Agencies' list in ePCS was not the same as the list in KIS, this meant that you could add items in KIS which weren't then reflected back in ePCS. In order to resolve this we re-used the KIS Other Agencies functionality in ePCS, so now the lists are the same. The trouble is you are now able to add an Other Agency in ePCS from the list such that the selected agency doesn't trigger the ePCS Summary to be updated and the agency doesn't look like it has been added. If you then add an additional agency and choose one of the historic ePCS agencies then both seem to magically appear on the ePCS summary screen.

This is a defect that we were not specifically testing for but which needs to be reviewed and resolved for future releases.

3.26 KIS Searches and Reports

The functionality exists within PCS Scotland to build your own KIS reports and this is actually quite flexible and user friendly. However, it is clear that practices using KIS will all need to run the same types of reports across the board. NHS Scotland has requested that EMIS produce a set of pre-created reports that practices can each import, so they don't have to do it individually.

This issue was reported in testing and is under review for future releases.

3.27 KIS Search and Reports Bug

If you edit a report that you previously built but come out of it without completing the build process the whole report is lost. This is not KIS specific but needs to be logged and looked at.

This issue was reported in testing and is under review for future releases.

For further information, see [module] in EMIS PCS Help 🕜 or contact EMIS Support.

Every effort is made to ensure that your EMIS documentation is up to date, but our commitment to constantly improve our software and systems means that there may have been changes since this document was produced.

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