

Minutes

Meeting of SCIMP Working Group

Date: 13th February 2013
Venue: Board Room 2 Gyle
Time: 10am-1pm

Present:

Paul Miller	PM	SCIMP Chair
Rob Walter	RW	GP Dumfries & Galloway
John Duke	JD	NHS Ayrshire
Kevin Boylan	KB	NSS NISG
Eileen Dargo	ED	NSS NISG
Alison Forbes	AF	NHS Tayside
Ian Dickson	ID	GP Lothian
Colin Brown	CB	GP Greater Glasgow & Clyde
Ian Thompson	IT	NHS Lothian
Libby Morris	LM	eHealth Clinical Lead
Bruce Thompson	BT	NHS Lanarkshire
Karen Lefevre	KL	NHS Grampian
Bob Milne	BM	
Suzanne Brown	SB	NSS SCIMP Project Manager

Teleconference/Videoconference:

Neil Kelly	NK	GP Dumfries & Galloway
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Apologies:

Ros O'Connor	NHS Highland
Alistair Taylor	GP Greater Glasgow & Clyde
Lindsey Ross	NHS Highland
Paul Woolman	



Gyle Square, 1 South Gyle Crescent, Edinburgh EH12 9EB

Interim Chair Professor Elizabeth Ireland
Chief Executive Ian Crichton

*NHS National Services Scotland is the common name of the
Common Services Agency for the Scottish Health Service.*

1 Welcome and Apologies

PM welcomed everybody to the meeting, SB read out apologies.

2 SCIMP Update

SCIMP were spending between 10-12k per calendar month which was a significant overspend - actual budget was approximately 90k per annum. IT thanked PM for creating the Budget paper as it gave him an insight into SCIMP and made him realise the breath of work that it does. PM introduced SB to the group and said she is the first point of contact for any issues/queries. SB is here on a temporary basis until a permanent member of staff is found.

The group noted the new funding arrangements via NISG with work agreed under the general terms of the IM&T strategy and in conjunction with the SCIMP Board.

IT is to produce a paper on Document Management for SCIMP papers and awaiting a response from SHOW. This paper will be sent to the group by email. KB stated that Sharepoint will be made public but is unsure when. PM said the SCIMP group may move forward with an ad hoc solution if there is nothing in place in 3 months time but confidentiality/security issues are to be checked first. Options are – Cloud from SHOW, Dropbox, Ignite, Google Drive, Wordpress and Sharepoint.

The SCIMP website is being updated, if there are any papers that are finished send them to SB to be uploaded onto the site. A Twitter profile has been set up, please follow and publicise.
@SCIMP_GP

3 Scottish Aspects of GMS Contract & QOF

There was general agreement that QOF implementations should support practice workflow and business processes. Use of existing functionality should be encouraged without needing new developments whenever possible.

Some SCIMP members met with Gregor Smith to discuss polypharmacy support in clinical systems. Some actions have arisen from this. In particular identification of Read terms for recording polypharmacy and medication management and guidance for templates for data entry and review for practices. **KL will identify Codes.** PM suggested producing up to a dozen read codes; KL added these should be contract templates and practices need to get used to them.

Noted that KIS roll out delayed for INPS . Also noted that KIS PCS will merge in medium term.

LM stated that the official letters sent to practices and road-shows are the main source for information. There is a recognised body of expertise among the group and SCIMP will continue to contribute advice on best practice.

KL said the new immunisations will affect a lot of practices. Exact requirements for GP's responsibility for new immunisation programmes are still subject to negotiation. As things stand Rotavirus vaccination will be given to infants, Herpes Zoster vaccination to 70 year olds and a

catch up to 79 year olds, Men C vaccination has changed giving one at childhood and one as a school leaver but also a catch up, Flu vaccination to be given to 2-16 year olds. The GP will probably be responsible for the 'At Risk' category and preschool. Schools will administer the other injections. New Read Codes will be coming out to support these. Issues rising from this are data sharing between schools and practices, a risk of double immunisations and more space will be needed in practices to hold all the vaccines. **KL to report back to SCIMP with an update and information.** SCIMP may be able to produce Guidelines on how to record lists from schools and other aspects of the programme. Some discussion on patient held immunisation records and use of SIRS.

4 Medicine Safety

Meeting on 20th March discussed the current status of decision support – minutes to follow. Some specific actions on academic review and RFCs.

Ian McNicoll introduced the group to Clinical Knowledge Manager (CKM). This allows people to have discussions online, it's free to sign up and invites will be sent by email for people to look at & comment on Archetypes. The process will be to plan a list of invitees, introduce them to the system, join up, sent invites and allow them a two week timescale. Invitees will take responsibility for individual archetypes. JC requested that resulting models go through the formal Change Process. Most changes will be clinical changes.

Some specific funding to support this process has been made available. PM commented that building a community of contributors was important and challenging. IM stated meeting scheduled for 20th March to introduce the CKM tool to stakeholders – invitee list is being decided. PM suggested developers as well as clinicians. IM stated the 'Allergy' model was the first priority as it was of limited scope.

5 GP2GP

ED stated that NISG are awaiting final costs regarding GPIT. The next step will be further financial negotiations. Robin Wright and Andy Robertson are leading the negotiations. The project team meetings are regular with 4 or 5 SCIMP members involved and on the Project Board. Testing will be discussed at the next meeting. GP2GP is hoping to be in place by September 2014.

6 Document Management

JC attended this part of the meeting to discuss the Scottish Ambulance Service 'folder'. He told the group a pilot is being set up in Glasgow and there is concern that there is no logical folder in Docman. CB had circulated a document on possible options. General agreement at the meeting and previously via e-mail that the folder structure was to assist end users and efforts should always be made to avoid introducing new folders for specific services unless good reason. The group agreed Option 2 on CBs document. JC agreed this also.

Discussion with respect to filing dates in Docman especially with respect to EDT. IT working on this. Has discussed with LF. LF has suggested 3 dates – event date, receipt date and construction

date. IT to meet with Chris McMail to clarify what dates are stored in Docman currently. May need RFCs for view or additional dates. If dates available then functionality to support viewing in Docman as required by user context is required.

PM noted RO has agreed to revise back scanning guidance and will report to group soon on this project.

7 Date Quality Issues

BT said at the CAB meeting that better summaries and data quality are required. BT stated he would like Lanarkshire to have GP Summary on Portal. **LF did update for this – action to check. SCIMP to a draft and circulate proposal on data quality / summaries – personnel / scope to be decided.**LM noted this would be in keeping with the Closing the Loop, GAP and Share IT

PM suggested an IT facilitator should be invited to attend SCIMP meetings and this was agreed. PM to invite, KB will discuss with GPITFAC team. ED confirmed this would be useful.

Note that LF continues to maintain the 'Exclusion List' and that this was going to be employed in Lanarkshire – BT?

Scottish data extraction process and project group being established, meeting in near future. Principals discussed. SCIMP Chair will attend.

8 Conference 2013-02-19

IT is the Chair of the conference and CB is deputy. An idea for the title this year is 'Closing the Loop'. Note that conference only just breaking even. Locum / sessional costs unlikely to be routinely available if we are to maintain 'free' attendance for SCIMP WG members. IT/CB will work up. Noted also liability issues with respect to unexpected cancellations – need clarified but as conference management is NHS cannot get insurance. PM highlighted that SCIMP work and SCIMP Conference budgets are separate and cannot expect NISG to pay for losses. SCIMP conference team will look carefully at finance, liability costing, Locum expenses and funded places. Need to fund invited guests also.

9 SCIMP Guidance

Any papers that are to be updated to the SCIMP website are to be sent to SB.

10 Software Testing

PM to update documents re Definitions, Assessment for testing and business process - KB & testing team / NISG. KB is looking for names of people who would be qualified / able to contribute to formal system safety testing. Maybe training requirements that SCIMP members could contribute to.

Date of next meeting(s)

19th June -	Cirrus 13.00-16.30, 12.30 for lunch
18th September -	Gyle 13.00-16.30, 12.30 for lunch
4th November -	Conference 2013, 18.30-19.45