NEWSLETTER

SCIMP
Scottish Clinical Information
Management in Practice

NHS
National
Services
Scotland

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SCIMP CONFERENCE 2008 – WHAT'S IN IT FOR CLINICIANS

The 2008 SCIMP annual conference was held on 4th & 5th November at the Hilton Hydro Hotel, Dunblane and was attended by 351 delegates from a varied range of Health Service professionals including GPs, Practice Managers, NHS Board IT Facilitators, Nurses, Allied Health Professionals and staff from National Services Division Scotland.

Once again, Atos Origin Alliance provided the principal sponsorship of the conference including a stand in the main conference hall. Other exhibitors were First Databank, Europe; Scottish Government (CHI), NHS Mail, Albasoft Ltd, ISD Scotland, EMIS, Brother (UK) Ltd, Primary Care Clinical Information Unit (PCCIU), DXS (UK) Ltd, InPS, MSD, NISG NHS Scotland, ISD Scotland, Tribal Consulting, Orion Health, Microtech Support Ltd, Adastra Software Ltd, Quicktrace Ltd, CADmeleon (UK) Ltd, and the SGHD Improvement & Support Team.

Dr Colin Simpson receiving
1st prize Best Use of IT Award

Healthspace providing a new dynamic area into electronic records, Heather Strachan on *Information Literacy* and Dr Leo Fogarty on *Migrating data*. Over the two days of the conference there was also a programme of interesting and varied parallel sessions on relevant topics.

Prof Andrew Morris, Presenting on
Options and Opportunities for eHealth

The theme of the conference was Sharing information, improving care. The keynote speakers on Day 1 were Prof Andrew Morris *Options and Opportunities for eHealth*, Professor Ireland and Dr Libby Morris *Gold Standards for Gold Patients* and Tracey Gillies on the *18 week Referral to treatment programme*. On Day 2 of the conference there were presentations from Dr Gillian Braunold on

Dr Libby Morris Presenting on Gold
Standards for Gold Patients

SCIMP are grateful for all these contributions. In the main, feedback was positive and suggestions made via the evaluation forms will be taken into consideration for next year's conference.

A DATE FOR YOUR DIARIES

The SCIMP Conference 2009 will be at the Dunblane Hydro Hotel on 3rd and 4th November. A flier giving information regarding the theme and proposed speakers will be distributed in the spring.

ADVICE FOR PRACTICES WHO ARE CONSIDERING 'BACK SCANNING' THEIR PATIENTS' PAPER NOTES.

A document which is intended to inform general practitioners, practice managers, practice IT administrators and GP IT Facilitators and to assist them in making an appropriate business decision based on their back scanning requirements has been prepared by SCIMP. The document does not dictate what to do, but provides a framework upon which options can be formally assessed. It is recognised that each practice's requirements in this area will be different and this is reflected in the advice supplied. http://www.scimp.scot.nhs.uk/eRecords_advice.html

SGHD eHEALTH PROGRAMME

The eHealth Programme aims to improve patient care through advances in technology, resulting in better access to health information, quicker test results for clinicians and joined-up GP and hospital services. The eHealth website is intended to provide detailed information about the programme, regularly update news on developments at national and local level and provide opportunities for feedback.   http://www.ehealth.scot.nhs.uk/

COMMUNITY NURSING CENSUS

Data regarding the Community Nurse Census was published on the ISD Website on 25 November 2008. The report contains national level findings from the Community Nurse Team Census carried out on 24th April 2008. It includes details on the purpose of the census, the benefits, the methodology and identifies potential limitations. It also discusses the next steps and future work. http://www.isdscotland.org/comm-nurse-census

EMERGENCY CARE SUMMARY

ECS has now reached a major milestone with 2 million accesses made since the national launch in September 2006. This demonstrates how much ECS is being used to improve patient care in Out of Hours, A&E and NHS24.

The **Scottish Ambulance Service (SAS)** are planning to have ECS access for paramedics on emergency calls and plan to start in 2009. Access to ECS will only be available for paramedics through their cab based terminals. Patient consent will be asked for before access to ECS will be made. Access by 999 operators is not planned at this stage due to consent and patient identification concerns.

Developments are underway to allow integrated access between the national **Accident & Emergency (A&E)** system (EDIS) and ECS which will significantly benefit users by reducing the need for a separate user name and password. This should be ready by April 2009 as part of the next major EDIS software release.

The next ECS release will take place in February 2009 and includes enhancements to the audit reports as well as performance improvements.

A further release for ECS will include support for the new national Identity and Access Management (IAM) Programme and additional prescribing information from the ePharmacy Chronic Medication Service.

As part of the national eHealth Strategy for 2008-2011, the ECS Programme has a development plan known as **Tranche 2 – Future plans** outlining possible extensions to the information held on ECS and an increase in the number of users.

Over the past two years as use of ECS has become established there is significant demand from clinicians to include additional information on ECS to increase the benefits to patient safety and care. The ECS Programme has a prioritisation process to assess each item that has been suggested and consider if new user groups should have access to ECS. This is an ongoing process and it should be stressed that no development will take place without additional consultation and discussion with the stakeholders and users of ECS. Further information will be published once the full business case has been approved by the eHealth Programme Board.

Further information on ECS can be found at www.ecs.scot.nhs.uk

PALLIATIVE CARE SUMMARY

The project known as ePCS is based on the Gold Standards Framework for cancer care and is aimed at improving communications between Primary Care and OOHs for patients with Palliative Care needs. It is a key part of the National Palliative Care Action Plan launched by the Health Minister on 2nd October 2008. http://www.scotland.gov.uk/Publications/2008/10/01091608/0

ePCS is an addition to the existing ECS infrastructure and provides detailed information to OOH and NHS24 for patients who need it. ePCS information is only sent from the GP Practice with full patient consent.

The ePCS is currently being tested by some EMIS and InPS practices in Grampian Health Board and the national rollout will start later in 2009. GPASS will be part of the national rollout of ePCS with 2 pilot sites in Ayrshire and Arran planned.

Further details will be published by the National Palliative Care Plan team in due course.

GP CONNECT AND DOCMAN TRANSFER

NHS Board GP Facilitators continue to roll out Docman Transfer across the 12 NHS Boards that were already live. 976 (96%) GP Practices now have Docman software installed and 883 (86%) of these GP Practices are now Docman Transfer enabled.   Discussions are currently underway with NHS Shetland to agree a rollout date for Docman Transfer.

For 2009 PSD are planning a number of improvements to the Docman Transfer process. These will include:

- Make archiving mandatory following patient export.
- Providing an unarchive facility so that practices will be able to access previous Docman records, under agreed circumstances, without having to request them back from PSD.
- Developing a list of acceptable file types (white list) that may be transferred via Docman transfer. This will mean that if Practices attempt to export Docman packages containing unacceptable file types, they will be required to convert the problem file(s) to an acceptable file type before packages will successfully export. This white list will be aligned with the GP2GP programme in England for future compatibility.
- A review of the process for transferring Temporary Resident medical records is currently underway within PSD to determine if a more efficient electronic process can be developed.
- A review of the process for cross border transfers with a view to implementing an electronic solution.

As they move into 2009/10 PSD will start to develop the requirements for the GP2GP element of GP Connect. Further information, guidelines and FAQs on Docman Transfer can now be found on the PSD website. http://www.psd.scot.nhs.uk/professionals/medical/DocmanTransfer.html

SCIMP RECOMMENDED READ CODES

The first SCIMP 800 list was produced in 2001. It was modified in 2006 to comply with changes to the GMS Contract and to incorporate other coding formularies in use e g. the OSCAR project run in West Lothian. This has been updated to Version 4 in January 2009 with further small changes highlighted in red and detailed in the Changes document at the link below. Please be aware that these codes may be subject to further slight modification when new code sets for the QOF are published. Two lists are available on the website, both contain the same codes but, within each chapter, one is arranged alphabetically according to the Read Term and the other is arranged alphabetically according to the Read Code. http://www.scimp.scot.nhs.uk/coding_readcodes.html

UPDATE TO QOF INDICATORS WITH ADVICE ON CODING

SCIMP will be updating their Contract guidance website to Version 13 as soon as these have been officially published.

We would welcome any comments you may have about either of these updates, please contact Annabel Chambers at annabel.chambers@isd.csa.scot.nhs.uk

GPASS DATA PROTECTION REPORT

GPASS have developed an enhanced Data Protection Report to provide practices with an up to date report which includes all data held about any patient in GPASS 2007. It is a legal requirement to send this report to the next practice but this information **should not be printed out**. Instead, practices should create a PDF file and transfer this information via Docman Transfer. Please see guidance on how to do this at http://www.scimp.scot.nhs.uk/documents/HowtosendtheGPSystem....GPASStoDocmanPatientSummaries.doc

TEST PATIENTS

Test patients should never have a CHI number on the system as this could be transferred onto other databases such as SCI-DC and SCI Store and overwrite records belonging to an existing patient. There have been incidents where overwriting has affected whether patients routinely receive their retinopathy screening invitations.