

GP2GP National Rollout Deployment Check List

PCT readiness criteria

The purpose of this checklist is to:

- Help primary care trusts (PCTs) in assessing their state of readiness for the implementation of GP2GP.
- Give PCTs an understanding of the local preparations necessary for ensuring successful implementation of the GP2GP software.

Organisational area	Requirement	Essential/ Desirable	Yes/ No	Information	Action required/comments (for PCT use)
TECHNICAL	Where practices have a shared server the server has to be configured correctly on the Spine Directory Service so as to enable GP2GP.	Essential		If no, will result in a failed deployment. Action required: any queries should be highlighted on the GP2GP National Deployment Spreadsheet.	
	Branch surgeries should not hold separate patient databases, i.e. all new patient registrations take place where the main patient database server is held.	Essential		If no, will result in a failed deployment.	
	PCTs with third-party networks must configure the network to allow access to NHS Spine	Essential		If no, will result in failed deployments. Action required: PCTs should	





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	applications.			indicate sites affected on the National Deployment Spreadsheet, including the contact details of the responsible PCT lead. Result: Suppliers and if necessary the GP2GP project team will then liaise with the PCT lead.	
	PCT IT Managers should liaise with system suppliers to ensure appropriate access through locally-configured firewalls.	Essential		If no, will result in failed deployments. Action required: PCTs should indicate sites affected on the National Deployment Spreadsheet provided by the GP2GP project team, including the contact details of the responsible PCT lead. Result: suppliers will liaise with the relevant PCT lead.	
	N3 network connections are available.	Essential		If no, will result in failed deployments.	



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	Local support desks should be aware of GP2GP and offered training if required.	Essential		If no, may create confusion for practices and ineffective support.	
REGISTRATION AUTHORITY REQUIREMENTS	All GPs have Smartcards and are correctly registered on the Spine Directory Service.	Essential		If no, GP2GP transfers will fail. Action required: verify with the PCT Registration Authority Manager that GPs registered at each practice have Smartcards and the GP2GP FAQs for further information.	
	Practice staff are trained in the use of Smartcards and know their PIN numbers.	Essential		If no, some members of staff will not be able to log on using their Smartcards and it will not be possible to activate GP2GP transfers.	
	PCTs must inform the GP2GP project team and clinical system suppliers whether a practice has been put into Pooled List state, e.g. where a practice is closing and it is put into a state of abeyance.	Essential		If no, will result in failed transfers. Action required: if a practice has a Pooled List the PCT GP2GP Lead should contact the relevant supplier helpdesk. Highlight those practices	



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				affected on the National Deployment Spreadsheet sent to you by the GP2GP project team. For further information please refer to the GP2GP FAQs.	
	Duplicate Smartcard entries should be removed from SDS.	Essential		If no, will result in failed transfers. Cause: when a GP moves from one practice to another duplicate GNC entries will be created on the Spine Directory Service if the original entry for the GP at the old practice is not closed. Action required: Registration Authority (RA) should add an end date (closed date) for the old entry on the Spine Directory Service. If a GP operates out of two practices then two separate GNC codes need to be allocated to the GP, i.e. one for each practice.	
	Practices operating a pooled list	Essential		In order to operate GP2GP	



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	must be correctly configured for GP2GP			<p>with a pooled list, the practice must be correctly configured on the Spine Directory Service. If not, GP2GP transfers will fail.</p> <p>This may have the additional consequence of a practice requiring subsequent refresher training with potential cost to the PCT.</p> <p>For further information, please see the FAQ “Can implementation take place if my practice has a Pooled List status?” www.connectingforhealth.nhs.uk/systemsandservices/gpsupport/gp2gp/implementation</p>	
	Configuration where a GP works out of more than one practice.	Essential		In order for the process to work, two separate GNC Code entries should be allocated on SDS for the GP, i.e. one GNC code for each practice. If not, this will result in failed transfers.	



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				For further information, please see the FAQ "Will GP2GP work if a GP operates out of two practices?"	
TRAINING	Practices should be encouraged to release appropriate staff to attend on-site training sessions. These include: <ul style="list-style-type: none">• practice managers• staff who will be responsible for registering new patients• staff responsible for processing pathology results• note summarising clerks.	Essential		If no, staff will not understand how to activate GP2GP or how to manage the Electronic Health Records received.	
	Practices should be encouraged to ensure that at least one GP attends a GP2GP on-site training session to understand the new requirements around: <ul style="list-style-type: none">• re-prescribing• drug allergies• business process change. It would be expected that this	Essential		If no, GPs will not understand how to deal with prescribing and the management of allergies transferred with Electronic Health Records.	

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	information is disseminated to other partners in the practice.				
	Practices should ensure that the relevant practice staff and clinicians have been encouraged to read and understand the Good Practice Guidelines, especially the GP2GP supplementary guidance.	Desirable		Further information can be found at: www.connectingforhealth.nhs.uk/systemsandservices/gpsupport/gp2gp/goodpractice	
	PCTs should encourage PRIMIS+ facilitators, practice staff and clinicians to access the PRMIS+ training materials.	Desirable		If no, practice staff and clinicians may not understand how to manage the electronic health record safely and effectively. www.connectingforhealth.nhs.uk/systemsandservices/gpsupport/gp2gp/goodpractice	
PCT REQUIREMENTS	PCTs should ensure they have identified a PCT lead for GP2GP, with their contact details being supplied to practices and the GP2GP project team at NHS CFH.	Essential		If no, it will result in confusion at practice level, ineffective lines of communication with the GP2GP project team and the GP clinical system suppliers, and delayed deployments.	
	PCTs should make all relevant PCT staff aware of GP2GP and	Essential		If no, could result in confusion at both practice and PCT level,	





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	the contents of the Briefing Pack.			and impact on deployments.	
	PCTs should encourage practices to release the relevant staff for onsite training.	Essential		If no, will result in failed transfers, confusion for staff where practice processes have not been agreed, and potentially a negative impact on patient care.	
GENERAL PRACTICE REQUIREMENTS	<p>Practices should have a compliant GP2GP primary care system and software version in use, e.g:</p> <ul style="list-style-type: none"> • EMIS LV 5.2 • InPS Vision 3 • EMIS Web Configuration 3&4. <p>Practices which are migrating to a non-compliant system/ software version should not be submitted for inclusion in the roll-out at this stage.</p>	Essential		<p>If no, GP2GP cannot be implemented at the practice(s) concerned.</p> <p>Further information on which suppliers have GP2GP compliant systems can be found on the GP2GP web pages at: www.connectingforhealth.nhs.uk/systemsandservices/gpsupport/gp2gp</p>	



	Practices are aware of, and operating to, data quality standards.	Desirable		The Information Governance Toolkit can be found at: https://www.igt.connectingforhealth.nhs.uk/	
PROJECT GOVERNANCE AND COMMUNICATION	Do you have access to the Tracking Database?	Essential		Note: When GPSoC requirements are implemented it will be necessary to update fields on the Tracking Database that are relevant to GP2GP. PCT Leads will be notified when this functionality becomes available.	
	Do you have a Project Board for GP2GP?	Desirable			
	Do you have a Project PID?	Desirable			
	Do you have a Risks and Issues process in place?	Desirable			
	Do you have a simple communication plan in place to raise awareness of GP2GP amongst your eligible practices?	Desirable			