

**FINAL – NOTES FROM GP PAN USER GROUP
APPROVED**



Connecting for Health

**GP Pan User Group
Notes of Meeting No. 10
13th March 2008**

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Attendees

Dr Manpreet Pujara	NHS CFH GP Clinical Lead (Chair)
Dr Mary McMinn	Microtest GP User Group Representative
Dr Joanne Bailey	BMA/RCGP Representative
Dr Paul Nathan	TPP User Group Representative
Dr Tim Cotton	Healthy Crosscare User Group Representative
Dr Chris Mays	East of England GP Clinical Advisory Group
Dr Nick Lowe	North West & West Midlands GP Clinical Advisory Group
Richard Gunn	iSOFT User Group Representative
Teresa McCrory	NHS Northern Ireland Representative
Sandy Scales	NHS CFH GP2GP and Healthspace
Dr Sarah Young	Ascribe User Group Representative
Kemi Adenubi	NHS CFH GPSoC Programme Director
Paula Moss	NHS CFH GPSoC Programme (Secretariat)
Dr Grant Kelly	NHS CFH – SNOMED
Mark Reynolds	NHS CFH - Demographics
Dr Graham Croker	NHS CFH – Choose and Book

Apologies:

Brian McKeown	NHS Northern Ireland Representative
Dr Charlie Stuart-Buttle	EMIS User Group Representative
Dr Nigel Taylor	Southern GP Clinical Advisory Group
Dr Tom Davies	InPS Vision User Group Representative
Dr Julia Piper	Independent Doctors Forum Representative
Dr Geraint Thomas	Healthy Crosscare User Group Representative
Stewart MacDonald	NHS Scotland Representative
Martin Dickinson	NHS Wales Representative
Dr Tony Penney	East Midlands Clinical Advisory Group
Stewart MacDonald	NHS Scotland Representative

Location

The Kings Fund, 11 – 13 Cavendish Square, London, W1G 0AN

Timing:

10:30 – 15:45 hrs

Circulation:

When approved, minutes of all NHS CFH GP Pan User Groups will be published via the NHS Connecting for Health website: www.connectingforhealth.nhs.uk/gpsoc

Enquiries

Any enquiries about these minutes should be directed to the GP PUG secretary via the GP Systems of Choice mailbox gpsoc@nhs.net

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1 Welcome & Introductions

The Chair welcomed all members to the meeting. All members introduced themselves in their roles.

2 Agreement of minutes of last meeting

The minutes of meeting No. 9th, January 2008 were discussed and were agreed.

They will be published on the GP Systems of Choice programme website at www.connectingforhealth.nhs.uk/gpsoc

3 Review of Actions

3.1 Meeting No. 8

Ref	Owner	Action	Status Update
41/2007	Paula Moss/Gillian Braunold	To distribute the TOR overview to the Group for the Safety Test of EPS R2 once received from Gillian Braunold.	Ongoing: PM: Have requested this information from Tim Donoghue. Discharged: Document sent with papers for meeting no 11.

3.2 Meeting No. 9

Ref	Owner	Action	Status Update
46/2008	Gillian Braunold	to identify who should present on CSA Development of Spine applications and advise Paula Moss for invitation to be extended	Update: Invitation extended to Andy Carr to address the group.
47/2008	Manpreet Pujara/Gillian Braunold	to discuss and advise if requirements and specification for the Summary Care Record should be distributed to the group in future.	Update:
49/2008	Paula Moss	to extend an invitation to Sandy Scales to update the group on the Healthspace strategy.	Discharged: attended meeting no 10.

4 Points raised as actions from previous minutes

27/2007 Len Chard: The group would like to understand when the new N3 site will be released which tests the speed of links. Can an update be given to the group please?

Discharged: Instructions sent on how to access with the papers for this meeting.

5 Introduction by Graham Croker, Primary Care Clinical Lead, Choose and Book

Dr Graham Croker, Primary Care Clinical Lead for Choose and Book gave an overview and introduction to the group on his background and remit for his new position as Primary Care Clinical Lead. Graham asked the group for help based on his remit of ensuring that the Choose and Book application is developed in line with expectations.

Initially Graham is working on integrated standardised referral letters and is also particularly looking for standardisation between systems.

Graham identified that he wanted to understand the experiences of the group and extended an invitation to sit with the group members to witness their experiences. Graham also asked the group to support him in working with suppliers to develop their systems to support Choose and Book.

The group discussed how this was being addressed and mentioned that one system supplier had developed a solution for Orthopaedic referrals which did not support the paper letters being sent. The group also raised concerns that hospitals were not supporting the system as defined and this resulted in doctors getting complaints about the system. The group asked if there was a way in which hospitals could be mandated to update the system.

Graham identified that SHAs were being encouraged to monitor the use of the system and that this would filter down to hospitals.

A group member identified that the Choose and Book system worked very well when PCTs and Hospitals worked together to establish and maintain an effective DOS and policy on slot availability, where the relationship is less effective then problems with Choose and Book appear to originate at the hospital end.

Discussions centred around standardisation with the group suggesting the following:

- A standardised template for each department
- Requesting the suppliers develop systems to support attaching standardised letters rather than developing these within their own systems

The group asked if the integrated approach was to run along side the current system but if the project was being developed to replace the current referral documentation from current clinical systems then Choose and Book will be trying to duplicate current system provision and therefore potentially duplicate effort both for NHS CFH and for clinicians.

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Graham identified that there was a lot of work to do to identify and then develop Choose and Book and asked if he could come back to the group with suggestions and in the meantime if the group had any suggestions to please send these to graham.croker@nhs.net.

50/2008: Paula Moss to distribute the presentation to the group. Discharged:
Presentation distributed prior to this meeting

6 Update from Sandy Scales on HealthSpace Implementation

Sandy Scales updated the group on the work commissioned by Harry Cayton on identifying where HealthSpace was used currently. Based on this there were 48 developments identified to improve HealthSpace. Working through the NHS Choices portal when the user wants personal information then they would enter HealthSpace. Security is therefore key and this is a significant part of the development.

The group were told that there will be a facility for carers to enter the system. Parents would be able to enter their health data for their children in their own account as currently advanced accounts are only available for those over 16. Issues around joint custody relationships would need to be considered.

There is consideration for a pre-consultation questionnaire and the group were asked to comment. The group would not be sure how this could work and how it would integrate with current systems. There was also discussion around the option of using nhs.net communicator as a way of having communications with patients and the group felt that this would have to be filtered/controlled by the clinician and based on an individual patient basis. The group felt that having email access could be dangerous and there would need to be filters applied for access. In some cases practices already allow patients to email a generic mailbox. The group felt that this should not be restricted to Primary Care. However, the group also felt that patients would gain benefit from seeing the drugs they are prescribed and comment to their doctor on these.

The group discussed the following:

- Types of data available
- Entry levels through the summary care record
- Levels of security
- Authentication with possible tokens

Sandy advised the group that if a patient is not registered with a GP currently there is no access to Healthspace. Sandy also identified that some of the new services would be available through HealthSpace within the next 12 months.

7 Update from Kemi Adenubi on GPSoC, GP2GP and QMAS

Kemi Adenubi advised the group that she had now taken over responsibility for GP2GP and QMAS as well as GPSoC.

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7.1 QMAS

KA reported that QMAS was largely business as usual, managing the end of year reporting cycle. There will be an infrastructure upgrade for QMAS but no major implementations will take place until after year end. There was a known issue relating to iSOFT practices which was due to be resolved within a few days. The attendees wanted assurances that there were mitigations in place to prevent the system crash that occurred last year.

As part of the preparations for SNOMED KA reported that NHS CFH would be looking for a supplier to test the implementation of QoF with SNOMED. This may be Healthy, EMIS or InPractice all of whom either have SNOMED based systems or are currently developing systems using SNOMED.

7.2 GP2GP

Progress on the rollout of GP2GP has been excellent, with the project exceeding the target of rolling out to 3500 practices a month early. The project team are now focussing on expanding the range of systems that support GP2GP and will be taking into account issues such as the introduction of new systems, system coverage and changes in code sets between systems.

The group asked if the Docman upgrade to v 7 was supported by GPSoC funding. Kemi advised that the infrastructure specification requested that the version bought should support GP2GP requirements for document transfer. The group suggested this may need to be re-emphasised through communication channels.

51/2008 Kemi Adenubi: to ensure that PCTs are aware of the requirement to provide document management services that are compatible with GP2GP

The group raised concerns about the potential for poor quality data transferred from practices that had not achieved data quality accreditation under the IM&T DES. This was countered by a comment from an IM&T DES accreditor who said that accreditation does not guarantee the long term quality of data in a practice. There was agreement that the introduction of GP2GP highlights and will drive the need for GPs to record data to a standard that can be shared with other GPs.

Other points raised relate to the ability to change inaccurate records entered by the previous practice and liability for incorrect information in the record. There was also a comment about the demarcation between the old practice's entries and the new practice's entries, particularly where the data was not in chronological order. This last related to a particular supplier's system and KA advised the GP to contact the supplier to request a system specific improvement.

52/2008 Kemi Adenubi: to report back on the issues raised around the implications of managing a record that includes data transferred from other practices using GP2GP.

7.3 GPSoC

Kemi gave an update to the group on current take up of GPSoC with 60% of eligible practices signed up to date. Kemi believed that the target to sign up all eligible practices would be reached as predicted by the end of March 2008.

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It was acknowledged there would be challenges with the PCT-Practice Agreement and that communications were being developed to support its implementation.

The group discussed supporting the process through their communication routes.

53/2008: All: The group members were asked to communicate with their users to support the implementation of the PCT-Practice Agreement and to feed back any reservations expressed by users.

8 SNOMED – Dr Grant Kelly

Dr Kelly introduced himself to the group and gave his background as a GP in Chichester, ex-Chair of GPs IM&T, ex-Chair of JCG and an independent advisor to NHS Connecting for Health.

Dr Kelly gave a presentation to the group identifying the current status of SNOMED, the challenges around implementation and sought advice from the group on the GP implementation programme.

Grant advised that Choose and Book will be implementing SNOMED in April 2008 in a limited way as a test bed for the future.

Grant asked the group to support the set up and implementation of SNOMED. The group commented that as long as there were no interruptions to current working practices they would support.

The next stage is for GP NCLs/Mark Davies and Grant Kelly to discuss and then come back to the group with an update at a future meeting.

54/2008: Manpreet to invite Grant Kelly to present at a future meeting.

55/2008: Paula Moss to distribute the presentation to the group. Discharged: *Presentation distributed to the group with the meeting papers.*

9 Demographics Presentation by Mark Reynolds, Programme Head

Mark Reynolds gave a presentation to the group on the work that is being undertaken and the NHS Care Record Service, the work currently being undertaken by the Demographics Team and the development timetable.

The group identified that It would be helpful if there was a guidance document available for GPs to give to patients on flagging a record as sensitive.

56/2008: Mark Reynolds to add a guidance document as a requirement for GP patients. Discharged: *Mark Reynolds confirmed this has been added to the Demographics work plan.*

The group were asked to direct any questions that could be added to the FAQ section of their web site to mreynolds@nhs.net.

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Mark advised that two documents had been submitted to the CIOs for approval around the release of 2008-A to the Spine with some background information and an update bulletin. The group requested copies of these documents once they become available.

57/2008: Mark Reynolds to distribute the documentation around the 2008-A release with the group once approved by the CIO's. *Discharged: Documentation distributed on 17th April to the group.*

10 Terms of Reference for the Group

Manpreet identified that there was an opportunity for the group to expand their remit and suggested that the group may be seen in the future as a source for input into developments in Primary Care. The group were also encouraged to ensure their attendance and if they were unable to attend identify an alternative individual to attend in their absence.

The group were therefore asked to review the Terms of Reference and identify how these can be enhanced to reflect further input.

58/2008: Paula Moss to distribute the Terms of Reference to the group. *Discharged: Terms of Reference distributed to the group with the meeting papers.*

59/2008: Members were asked to review the TORs with a view to identify how they can be enhanced to reflect further input.

11 AOB

PM advised the group that as the year end approached it would be helpful to receive prompt expense requests.

Manpreet advised that as he represented the GP PUG on the EPS Implementation Board and as this was no longer appropriate he needed a replacement from the group. Tom Davies identified he would represent the group and the group seconded this suggestion.

12 Future Meetings

The following dates have been suggested for discussion at the next meeting:

15th May 2008

18th September 2008 – please note this is a change.

27th November 2008

The meetings will be held in The Kings Fund, Central London at either 10:30am to 3:30pm or 11.00am – 4.00pm.

Agenda's and papers would be distributed one week prior to the meeting commencement.

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The group identified that having meetings on the third Thursday of the month was difficult and asked for this date to be avoided in future.