**This document has been approved for distribution by the**

**South, Central and West Commissioning Support Unit Communications Team (Jubilee House)**

|  |
| --- |
| cid:4449A91B-2C3B-4344-8439-94BD683C1E3E |
| **November 2017** | **Issue #11** |
| **Live**WireItems you need to know right now:* [NHS Mail for Care Homes: We need your help!](#NHSMAIL)
 | In this Edition:* [SCW GP IT Training Team](#SCWGPIT)
	+ [EMIS User Group Meetings](#EMISUSER)
* [OUH Lab User Questionnaire](#OUHLAB)
* [NHS Mail for Care Homes – We need your help!](#NHSMAIL)
* [Diabetes Dashboard – EMIS Search and Report](#DD)
* [Docman 10](#DOCMAN)
* [Important Cancer Referral Information – 2WW Urology](#UROLOGY)
* [EPS – October 2017](#EPS)
* [Patient Online](#PO)
	+ [Benefits](#BENEFITS)
	+ [Patient Online Toolkit](#TOOLKIT)
 |
|   |
| **SCW GP IT Training Team**EMIS User Group Meetings |
|  | Thank you to all those who attended the latest EMIS User Group meetings held at Abingdon Surgery and Chipping Norton Surgery. Please see attached [the minutes](http://www.oxfordshireccg.nhs.uk/professional-resources/documents/the-wire/issue-11/oxford-emis-user-group-meetings.pdf) taken during both meetings and additional documentation below. We will be in contact with future dates. * [Managing online registrations](http://www.oxfordshireccg.nhs.uk/professional-resources/documents/the-wire/issue-11/managing-online-registrations.pdf)
* [EMIS Patient Access](http://www.oxfordshireccg.nhs.uk/professional-resources/documents/the-wire/issue-11/emisv7.1-patient-access.pdf)
* [EMIS Web User Group](http://www.oxfordshireccg.nhs.uk/professional-resources/documents/the-wire/issue-11/emis-web-usergroup-v71recap-and-v72changes.pptx)
* [Activate Email Configuration](http://www.oxfordshireccg.nhs.uk/professional-resources/documents/the-wire/issue-11/action-required-activate-email-configuration.pdf)
 |
|  |  |  |
| [Return to top](#TOP) |
|  |
| **OUH Lab User Questionnaire**Directorate of Pathology & Laboratories Service User Questionnaire  |
| OUH laboratories are keen to understand how their services are perceived throughout GP Surgeries.  These services include Haematology, Biochemistry, Immunology, Microbiology, Genetics and Cellular Pathology.To that end we invite you to complete [this survey](http://www.oxfordshireccg.nhs.uk/professional-resources/documents/the-wire/issue-11/lab-user-questionnaire-2016-17.docx) and offer your views.We also wish to ensure that you are aware of the current location of the Pathology Handbook.  All relevant information is available here:<http://www.ouh.nhs.uk/services/departments/laboratory-medicine/default.aspx>Andrew PlattQuality Manager, OUH Laboratories |
|  |  |  |
| [Return to top](#TOP) |
|  |
| **NHS Mail for Care Homes**We need your help!  |
|  | Can we ask for your help again with this project? The aim is for all care homes across Oxfordshire to be set up for and use NHS mail, which will benefit GP surgeries when communicating with care homes about their patients. |
| The first step in obtaining the NHS mail accounts is for the care homes to complete the IG toolkit.  Lorraine Amor, our Information Governance Officer, is facilitating this through IG workshops as well as providing individual support. A variety of care homes are now working on their IG toolkit, some have achieved compliance and the first NHS mail accounts are being used. There is still work to be done, though; and that is where we would like to ask you to encourage the care homes you work with to participate in the project, whilst explaining the benefits this brings. In the first instance they should contact Lorraine Amor, who will support them to complete the IG toolkit.For further information on the project, please contact:* ***Lorraine Amor***, Information Governance Officer: lorraine.amor@nhs.net
* ***Evelyne Schotte***, Programme Manager: evelyne.schotte@nhs.net
* ***Eloise Bird***, Programme Support Administrator: eloisebird@nhs.net
 |
|  |  |  |  |
| [Return to top](#TOP) |
|  |
| **Diabetes Dashboard**EMIS Search & Report |
|  |  |
| A dashboard has been developed to help support improvement in the management of diabetes, both for patients and services. A pilot has been successfully carried out in the North East locality over the last few months and it is hoped to roll the dashboard out to all practices in the New Year.The LMC have approved the process, which requires EMIS Search and Reports to be installed, a sharing agreement to be signed and data sharing to be enabled within EMIS. The patient confidential data (PCD) will be fed through to the CSU from each practice. EMIS Search and Reports is also to be the replacement for MIQUEST. It has built in functionality and is a centralised search tool. It offers greater control and transparency, and stringent audit trails allow practices to see what data has been extracted from their systems, when and by whom. Some of its benefits are:* Different levels of reporting can be set within folders - pseudonymised, anonymised and PCD.
* It enables bespoke centralised searches, reducing the burden on GP practices; data is pulled rather than pushed
* Reports created centrally can be shared with the practices
* Patient consent status is respected
* The reporting takes a few minutes as compared to hours using MIQUEST, freeing up valuable time
* Data quality is improved through the application of consistent coding

We will be visiting all Practice Manager Forums to explain this in more detail before the rollout, but wanted to give you advanced notice that the dashboard will soon be available.If you would like further information in the meantime, please contact:***Mohammed Arif*** – Project ManagerSCW* 07802 773 669

mohammed.arif3@nhs.net |
| [Return to top](#top) |
|   |
| **Docman 10** |
| We are about to upgrade your Docman 7 server-based system to Docman 10, which is the new hosted version.There are currently 5 practices taking part in a ‘first of type’ pilot to check the data upload and, once this has been completed in the next couple of weeks, we will be able to start moving towards everyone upgrading in the new year.  A couple of things need to happen prior to this – a tool will be uploaded to your local server to enable data to be streamed up to the cloud, and desktop clients will be pushed out to all your PCs.  This will notbe done without contacting you first.  In the meantime, it would be helpful if you could take a look at [this document](http://www.oxfordshireccg.nhs.uk/professional-resources/documents/the-wire/issue-11/pre-migration-system-review.pdf) and ensure that processes are in place to cover this work.  A lot of the content was covered in the recent Docman workshops, but most of it is general maintenance.  We will be in touch very soon, but if you have any queries, please contact:***Lynne Colley*** – Senior Project ManagerSCW* 07747 455 955

lynne.colley@nhs.net |
| [Return to top](#TOP) |
|  |
| **Important Cancer Referral Information – 2WW Urology**  |
| Urology is now ‘live’ for two week wait directly bookable services (2WW DBS) on ERS.The services are as follows:

|  |  |
| --- | --- |
| **Published Services** | Suspected Urology Cancer-2ww-Abdominal Mass (Bladder/Renal)-Oxford University Hospitals-RTH |
|  | Suspected Urology Cancer-2ww-Haematuria (Bladder/Renal)-Oxford University Hospitals-RTH |
|  | Suspected Urology Cancer-2ww-Penile and Testicular-Oxford University Hospitals-RTH |
|  | Suspected Urology Cancer-2ww-Prostate-Oxford University Hospitals-RTH |
| **Restricted Service**  | Suspected Urology Cancer-2ww-Prostate FTF-Oxford University Hospitals-RTH (**NB GPs cannot refer directly into this Service; they refer via 2ww-Prostate)** |

Additional important information for GPs and patients: * **The 2ww-Prostate** clinic gives telemed appointments. The OUH Consultant will telephone the patient at the booked time and date.  The patient does ***not attend a clinic***.
* If a patient needs to have a face-to-face appointment due to specific criteria being met, they will be telephoned before the telemed appointment is due and a different appointment arranged for them to attend clinic.
* **Haematuria Service**.  The patient will go straight for a Flexi Cystoscopy.   They need to bring a dressing gown and slippers (for their own comfort) together with a urine sample to the appointment.  They will have a local anaesthetic but will be able to drive to and from the hospital.  It is a 20 minute appointment.

If you need any further information please do not hesitate to contact Sally Harris on: |  |
|  |
| ***Sally Harris*** – Patient Contact Centre & 2 Week Wait Service ManagerOUH* sally.harris@ouh.nhs.uk
 |
| [Return to top](#TOP) |
|  |
| **Electronic Prescription Service (EPS) update & recent utilisation figures**October 2017 |  |
|  | The most recent EPS Utilisation Figures are now available via the links below.  Practices in Oxfordshire continue to use the EPS solution to good effect and are consistently above the national averages.  Currently, of the 63 practices live with EPS, 88% are achieving over 80% (and more) of repeat prescriptions going through EPS (NOTE:  the national average for the month of October is 78%).   |
| For information regarding your practice utilisation, please follow the links below:* [Repeat dispensing](http://www.oxfordshireccg.nhs.uk/professional-resources/documents/the-wire/issue-11/repeat-dispensing-october2017.pdf)
* [Repeat prescribing](http://www.oxfordshireccg.nhs.uk/professional-resources/documents/the-wire/issue-11/repeat-prescriptions-october2017.pdf)
* [All scripts](http://www.oxfordshireccg.nhs.uk/professional-resources/documents/the-wire/issue-11/all-scripts-october2017.pdf)

A simple way of improving utilisation is to ensure that all patients have a nomination.  Currently, of the 730,800 patients in Oxfordshire, only 39% have a nomination!A new EPS PowerBI dashboard is now available and can be found at <https://digital.nhs.uk/deployment-and-utilisation-progress-data>  ; it includes the following information:Page 1. OverviewPage 2. Report contentsPage 3. Electronic Prescription service National StatisticsPage 4. CCG Information Page 5. STP InformationPage 6. Pharmacy InformationPage 7. GP InformationPage 8. Data OverviewPlease utilise the drop down menus to find the relevant information. If you would like help with EPS or with looking at E-RD, please contact:***Lynne Colley*** – Senior Project ManagerSCW* 07747 455 955

lynne.colley@nhs.net |
| [Return to top](#TOP) |
|  |
| **Patient Online**Benefits and Toolkit |
| **Let’s talk about the benefits…*** **Saves patient’s time -** Fewer phone calls and journeys to the practice
* **More convenient access -** 24/7 access from app or website on a SMART phone or computer
* **Promotes self-care -** Patients can feel more involved and in control of their care
* **Becoming a partnership -** Improves patient knowledge and moves away from paternal model
* **Reduces DNAs -** Appointments that are easy to book and cancel with one click
* **Releases admin time -** Fewer calls and lower footfall make for better use of admin staff
* **More ways to communicate -** Online services give patients a 3rd option after phone or face to face
* **Improves accessibility -** Online services can be used with a screen reader or other tools
* **Better patient experience -** Patients can feel empowered due to easier and more convenient access
* **More shared decisions -** Patients are better informed and so go to a consultation prepared
* **Better use of clinical staff -** Whatever a computer can do for you, it should be doing it
* **Behaviour Change -** GP online services help practices in their digital transformation programme

**Patient Online Toolkit**[This is the link](http://www.oxfordshireccg.nhs.uk/professional-resources/documents/the-wire/issue-11/promotion-toolkit-for-practices.pdf) to a really useful toolkit for practices. The aim of the toolkit is to help you to promote GP online services to your patients and encourage them to register for GP online services. The texts in the toolkit can be adapted so they are relevant to your practice. You can order a variety of promotional materials (more information on page five of the toolkit) from the Publications Order Line at [www.orderline.dh.gov.uk](http://www.orderline.dh.gov.uk). If you would like help with any aspect of Patient Online, please contact:Lynne ColleySenior Project Manager07747 455955Lynne.colley@nhs.net  |
| [Return to top](#TOP) |
|  |
| **GP Referral Pro Formas**News and release notification November 2017Please refer to the new OCCG website [OCCG website](http://www.oxfordshireccg.nhs.uk/) when searching for information. Zip folders containing full sets of referral pro formas can be found on the [Referral Pro formas](http://www.oxfordshireccg.nhs.uk/professional-resources/referral-pro-formas.htm) page or via the link at the top or right of pages in the Professional Resources > Clinical Guidelines section of the OCCG website. **EMIS practices**The zip folder EMIS-Pro-formas, with a date stamp in the format YYYYMMDD, contains all of the EMIS referral pro formas currently in use. It can be saved, and imported in one step from within EMIS Web.Also found on the Referral Pro formas page, the documents ‘How to Cleanse your EMIS Pro forma library’ and ‘Working with GP Pro formas’ give instructions on how to import the *single* zip folder and remove all old templates which have been replaced.**Vision Practices**Release of these pro formas is not always concurrent with the EMIS forms as they require further processing.The zip folder INPS-Pro-formas, with a date stamp in the format YYYYMMDD, contains all of the InPS pro formas currently in use. Some of these pro formas have been upgraded to include SmartTags, which reduces the need to enter data by hand. They can be identified by a suffix of ‘s’.

| **November 2017 pro forma updates** |
| --- |
| **Pro forma name** | **Version** | **New, or reason for update** |
| 2WW Suspected Brain and CNS Cancer | v9 | * Removed instruction to consider urgent direct access MRI brain, pending agreement with Neuroradiology Department
 |
| 2WW Suspected Colorectal Cancer | v9 | * Amended to incorporate a pathway to the Community Endoscopy service
 |
| 2WW Suspected Head and Neck Cancer | v8 | * Instructions on where to send the referral form corrected
 |
| 2WW Suspected Upper GI Cancer and Hepato-Biliary Cancers | v9 | * Amended to incorporate a pathway to the Community Endoscopy service
 |
| 2WW Suspected Urological Cancer (excluding Prostate) | v7 | * Advice added for referring patients with haematuria (not 2WW)
* Clinic details added for Directly Bookable Service (DBS) for 2WW referrals
 |
| 2WW Suspected Urological Cancer (Prostate) | v10 | * Clinic details added for Directly Bookable Service (DBS)
* Advice included about use of ‘telemed appointments’
 |
| ACE DUMMY referral | v3 | * This pro forma is no longer in use as the Suspected Cancer (SCAN ACE) LIVE Referral Form is now live across all localities
* It will remain in the Pro Forma Library for a short time as a placeholder, redirecting users to the live SCAN form
 |
| InHealth Echotech Community Service Referral Form | v6 | * Contact details for the service updated
* NB InHealth have been asked to contact the GP Pro Formas Team when changes are required to the referral form, rather than approaching GPs directly requesting use of inappropriate forms
* At our request, Echotech have updated their website to now show accurate information about how to make a referral
 |
| Lower GI Endoscopy (not 2ww) Referral Form | v1 | * New pro forma for routine referral to InHealth Endoscopy
 |
| MSK Assessment Triage and Treatment Service  (MATT) | v5 | * Updated to avoid EMIS bug whereby if the user doesn’t select any consultations from the menu, ALL recorded consultations merge onto the form
 |
| Suspected Cancer (SCAN ACE) LIVE Referral Form | v6 | * Now live at all Oxfordshire practices
 |
| Upper GI Endoscopy (not 2ww) Referral Form | v1 | * New pro forma for routine referral to InHealth Endoscopy
 |

*Please write to us* at **occg.gpproformas@nhs.net** if you have any queries or comments about the referral pro formas.***Jane Thurlow***Project Support Officer, Digital Transformation Team[Return to top](#TOP) |
|  |
|  |
|  |
|  |

**Want to see past issues?**

You can find all back copies in Wire Archive at the following link:

<http://www.oxfordshireccg.nhs.uk/professional-resources/the-wire-news.htm>