Meeting: Primary Care Commissioning Committee

Meeting Date	22 September 2021	**Action**	Receive
Item No.	10	**Confidential**	No
Title	GP IT Futures: EMIS Migration Progress Update		
Presented By	Dr Sanjay Kotegaonkar		
Author	John Buttle, Senior Informatics Manager		
Clinical Lead	Dr Sanjay Kotegaonkar		

Executive Summary

In March 2021 a paper proposing the migration of GP clinical systems foundation solution from Vision to EMIS was approved by the Bury CCG Governing Body.

Regular updates on project progress were requested by the Primary Care Commissioning Committee (PCCC). This report forms the second programme update report to PCCC with further updates planned every two months until agreed programme completion in November 2022.

Bury CCG are now in Emis migration rollout and to date there has been one GP Practice migrated on the 29th July, The GP Practice was Whittaker Lane. The rollout plan that has been agreed is in the attached appendix.

Recommendations

PCCC is required to:
- Receive the report and note the work of the project team since March 2021

Links to CCG Strategic Objectives

SO1 - To support the Borough through a robust emergency response to the Covid-19 pandemic.	☐
SO2 - To deliver our role in the Bury 2030 local industrial strategy priorities and recovery.	☐
SO3 - To deliver improved outcomes through a programme of transformation to establish the capabilities required to deliver the 2030 vision.	☒
SO4 - To secure financial sustainability through the delivery of the agreed budget strategy.	☐

Links to CCG Strategic Objectives						
Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:						
GBAF						

Implications						
Are there any quality, safeguarding or patient experience implications?	Yes	☐	No	☐	N/A	☒
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	☒	No	☐	N/A	☐
Have any departments/organisations who will be affected been consulted?	Yes	☒	No	☐	N/A	☐
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	☐	No	☒	N/A	☐
Are there any financial Implications?	Yes	☐	No	☐	N/A	☒
Is an Equality, Privacy or Quality Impact Assessment required?	Yes	☐	No	☐	N/A	☒
If yes, has an Equality, Privacy or Quality Impact Assessment been completed?	Yes	☐	No	☐	N/A	☒
If yes, please give details below:						
Consultation with: - Clinical lead (Dr. Sanjay Kotegaonkar) - Practice Managers and Bury GPs - GMSS - Clinical system supplier (Emis)						
If no, please detail below the reason for not completing an Equality, Privacy or Quality Impact Assessment:						
Are there any associated risks including Conflicts of Interest?	Yes	☐	No	☒	N/A	☐
Are the risks on the CCG's risk register?	Yes	☐	No	☒	N/A	☐

Governance and Reporting		
Meeting	Date	Outcome
N/A		

GP IT Futures: EMIS Migration Progress Update- September 2021

1.   Introduction

1.1   As part of an NHS Digital mandated requirement to move to the GP IT Futures contract, Bury CCG conducted an evaluation of available GP foundation clinical systems. A thorough evaluation exercise found EMIS to be the recommended foundation clinical system for all 26 Bury practices. This recommendation was progressed through Bury CCG governance and approved in March 2021. Regular progress updates on the implementation were requested by PCCC and this report forms the second update.

1.2   The EMIS migration project sits alongside other significant digital hardware and software improvements projects aimed at general practice. Prior to commencing the EMIS migration, practices are being asked to complete a refresh of:
GP Practice IT devices, replacing out of warranty/old PC's with Laptops and the newer G3 PC's, this project is still ongoing with delivery and completion by the end of September 2021
Migration to Docman 10, due to be completed by December 2021
This is to reduce the burden on the practices during the 12 weeks pre go-live stage for   the EMIS migration.

1.3   Each practice in Bury has been contacted individually to inform them of the EMIS migration process and to agree a migration date. The practices migration order was determined by their planned completion date of the pre-requisites mentioned in 1.2 which was triangulated with ensuring we have equal spread across PCNs. This determination has been re-visited and the Emis Web migration rollout will be focused on the PCN's requirements, this will start to take effect in April 2022 as up to March 2021 the consultation for each GP Practices had started the process of engagement. The reason for the change in rollout of Emis Web migration is due to the requirement of collaborative working across each PCN using Emis Enterprise. The way forward with digital maturity was also a concern and this was factored into the new decision.

1.4   The first GP Practice in the locality to go live on EMIS, was Whittaker Lane on July 29th. The attached plan outlines the number of GP Practices that will Go-Live per month until November 2021 Each GP Practice will have their own migration plan. There has been some consultation between GMSS and Bury CCG IT on working up a Communications Plan (with covering letter) this plan will be emailed out by the GMSS Project Manager prior to the first Emis migration meeting for each GP Practice, this outlines all the requirements required by all parties, GMSS, GP Practice, Bury CCG and Emis the Clinical system supplier. Please see Appendix for copies of the Migration plan and the Communications plan.

2.   Key actions completed since March 2021

This programme of work has progressed at pace since March 2021. Key steps which have occurred since approval include:
- Contracts agreed and close to sign off with NHS Digital and EMIS using the GP IT Futures Framework
- Formation of an EMIS migration project board with representatives from CCG,

GMSS and Bury GP practices
- Seven GP Practices have started their EMIS migration journey, remainder practices, (migrating up to March 2021) have all been contacted and their individual migration timelines agreed
- Communication channels established with practices on the migration process with updates occurring via webinars, GP bulletin, Teams channel and email
- Development of a 'master' implementation plan which details all the internal operational actions required as well as when key third party suppliers need to be contacted. These implementation plans will be tailored for each practice
- Vision has been informed of the plan to terminate practice contracts and estimated go live dates per practice, Vision have been invited to regular meetings to discuss issues and any updated migration plans.
- Conversations started with GP Federation regarding migration to EMIS and their ability to work with Emis on Out of hours working.
- Links have been made with Medicines Management, Data Quality and Public Health teams regarding EMIS migration and training for their staff

3. Key actions planned till end of March 2022
- The new contracts are to be signed by EMIS and the CCG, this has been completed.
- Training days will start to occur for the first 12 migrating practices.
- A BlackPear solution will be procured for the migrating practices which will allow EMIS and Vision practices to continue to communicate with the GP Federation. (This solution was budgeted for as part of the business case)
- 12 GP Practices are planned to migrate to Emis web up to March 2022
- Servers will be built and installed for all GP Practices
- All 3rd party suppliers will be notified of the go-live dates for all GP Practices in order that they can hold back Results, registrations etc in the few days leading up to the actual migration day downtime.
- Bury CCG, GMSS and the clinical system supplier will be hosting regular meetings leading up the actual Go-Live day, these meetings will start approx. 16wks prior to each GP Practice migration, and be held every 3-4wks in that 16wk timeline. The meetings and the frequency may change due to internal/external factors, Holidays, availability of supplier staff.

4. Risks/ issues for escalation

- GP Practice not utilizing the familiarisation period to understand more of the system and to work up a list of questions for training based on each user's role within the GP Practice
- GP Practice engagement in meetings/updates

5. Related projects

5.1 Changing the foundation clinical system presents opportunities to streamline and improve functionality available to primary care. Key out of scope, yet related projects currently being explored by the Digital team include:
- SMS functionality: many Bury practices use Vision for their SMS functionality. Bury CCG commissions the functionality and practices pay for their SMS. Nine

Bury practices have procured their own platform for SMS, mainly iPlato and Accurx.

- P-code merger: Tower and Minden practices are undertaking a P-code merger two weeks after EMIS go-live. This was not possible using the Vision system due to the resulting database size
- EMIS Enterprise: this functionality will allow remote and real-time data searches which will not only save workforce time but will also enable the CCG/ national bodies to have access to CCG wide real-time data to inform priority projects. There is also a potential cost saving as having EMIS Enterprise (6p / patient) may allow the CCG to stop commissioning Informatica (22p/patient). An outline business case is being developed for presentation to the July EMIS Project Board
- Emis Mobile: 2-4 weeks after the migration has taken place Emis trainers will show users the Emis Mobile app and how to use. Bury CCG are looking at the Samsung Tablets that were issued to GP Practices by Vision, they were to be used in waiting rooms for staff to sign up waiting patients on Patient online. The GP Practices as we are informed did not use them. GMSS engineer assessed one of these tablets to check whether they matched the specifications used for Emis Mobile. They do not match the specs and as they were not issued by GMSS they will not be supported and maintained by GMSS. If they were to go on the asset list, they would need to be updated and it may also require an uplift on the Bury CCG SLA with GMSS. Bury CCG may wish to look at alternative devices to fulfil the requirement of the 2yr Emis mobile agreement.

4   Recommendations

The CCG is required to:
- Receive the report and note the work of the project team since March 2021

John Buttle
Senior Informatics Manager

Code	Practice	21/06/21	28/06/21	05/07/21	12/07/21	19/07/21	26/07/21	02/08/21	09/08/21	16/08/21	23/08/21	30/08/21	06/09/21	13/09/21	20/09/21	27/09/21	04/10/21	11/10/21	18/10/21	25/10/21	01/11/21	08/11/21	15/11/21	22/11/21	29/11/21	06/12/21	13/12/21	20/12/21	27/12/21	03/01/22	10/01/22	17/01/22	24/01/22	31/01/22	07/02/22	14/02/22	21/02/22
P83605	Whittaker Lane Medical Centre	Go Live	4wk PGL				29/07/21																														
P83011	Unsworth Medical Centre		12wk (Intro)		10wk PGL		8wk PGL		6wk PGL		4wk PGL				24/09/21																						
P83012	Tower Family Practice	16 Wk		14 wk PGL		12wk (Intro)		10wk PGL		8wk PGL		6wk PGL		4wk PGL				13/10/21																			
P83020	Minden Family Practice			16 Wk		14 wk PGL		12wk (Intro)		10wk PGL		8wk PGL		6wk PGL		4wk PGL				26/10/21																	
P83006	Ramsbottom Health Centre				16 Wk		14 wk PGL		12wk (Intro)		10wk PGL		8wk PGL		6wk PGL		4wk PGL				02/11/21																
P83025	St Gabriels Medical Centre					16 Wk		14 wk PGL		12wk (Intro)		10wk PGL		8wk PGL		6wk PGL		4wk PGL				03/11/21															
Y02755	Rock Healthcare - Moorgate/Radcliffe										16 Wk		14 wk PGL		12wk (Intro)		10wk PGL		8wk PGL		6wk PGL		4wk PGL				14/12/21										
P83007	Radcliffe Medical Practice														16 Wk		14 wk PGL		12wk (Intro)		10wk PGL		8wk PGL		6wk PGL		4wk PGL				11/01/22						
P83017	Woodbank Medical Centre																16 Wk		14 wk PGL		12wk (Intro)		10wk PGL		8wk PGL		6wk PGL		4wk PGL				25/01/22				
P83009	Blackford House Medical Centre																		16 Wk		14 wk PGL		12wk (Intro)		10wk PGL		8wk PGL		6wk PGL		4wk PGL				08/02/22		
P83608	The Elms Medical Centre																				16 Wk		14 wk PGL		12wk (Intro)		10wk PGL		8wk PGL		6wk PGL		4wk PGL				22/02/22
P83004	Uplands Medical Centre																								16 Wk		14 wk PGL		12wk (Intro)		10wk PGL		8wk PGL		6wk PGL		4wk PGL
P83603	Redbank Group Practice																												16 Wk		14 wk PGL		12wk (Intro)		10wk PGL		8wk PGL
P83612	Mile Lane Health Centre																															16 Wk		14 wk PGL		12wk (Intro)	
P83623	Longfield Medical Practice																																	16 Wk		14 wk PGL	
P83027	Greylands Medical Centre																																			16 Wk	
P83609	The Birches Medical Centre																																				
P83005	Fairfax Group Practice																																				
P83015	Ribblesdale Health Centre - Woodcock																																				
P83024	Knowsley Street Medical Centre																																				
P83010	Monarch Medical Centre																																				
P83621	Huntley Mount Medical Centre																																				
P83611	Walmersley Road Surgery																																				
P83021	Peel GPs - Palaniappan																																				
P83001	Townside Surgery																																				
P83609	Garden City Medical Centre																																				

KEY:

Go Live	
16 Wk Mtg	
14 wk PGL	
12wk (Intro)	
10wk PGL	
8wk PGL	
6wk PGL	
4wk PGL	

28/02/22	07/03/22	14/03/22	21/03/22	28/03/22	04/04/22	11/04/22	18/04/22	25/04/22	02/05/22	09/05/22	16/05/22	23/05/22	30/05/22	06/06/22	13/06/22	20/06/22	27/06/22	04/07/22	11/07/22	18/07/22	25/07/22	01/08/22	08/08/22	15/08/22	22/08/22	29/08/22	05/09/22	12/09/22	19/09/22	26/09/22	03/10/22	10/10/22	17/10/22	24/10/22	31/10/22	07/11/22	14/11/22	21/11/22	28/11/22	05/12/22
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																								16 Wk		14 wk PGL		12wk (Intro)		10wk PGL		8wk PGL		6wk PGL		4wk PGL			29/11/22	

EMIS Migration: Practice Onboarding Checklist

Practice Name:

Individual completing checklist (To be completed by both practice and GMSS Project Manager)

Timeline	Areas to be discussed
12 weeks prior to go-live (EMIS Led)	☐ Introduction day to be led by EMIS; EMIS will supply the practice log in details for EMIS Now, will talk the practice through data checking (4week deadline for data sign off), will support the practice with their training needs analysis and system configuration. Practice will also be given log in details for the dummy/familiarisation system on the Intro Day or soon after ☐ Training plan for all staff to be agreed with Emis and GMSS Project Manager ☐ Suggest identifying an area within practice for 2 devices to be set up together for staff training (one Vision, one Emis) ☐ Overview of the EMIS Migration process including practice responsibilities, EMIS Responsibilities and PM Responsibilities ☐ Overview of EMIS training process ☐ Practice to identify system champions to attend all training and to have the capacity to be the escalation contacts both pre and post go live ☐ Overview of downtime and the implementation of manual processes as per practice Business Continuity Plan ☐ Three forms will be sent to the practice from EMIS for the practice to complete; support will be provided by GMSS Project Manager ☐ EMIS to arrange an engineer visit for a practice technical survey- EMIS will contact the practice directly ☐ Practice Comms room survey to be organised by the GMSS Project Manager to assess infrastructure and space for the server installation. Findings will be relayed to CCG and to practice ☐ GMSS Project manager will contact the practice separately to get information to complete information for third party supplier moves ☐ Timeline for practice to have laptops and desktop refresh programme ☐ Docman 10 migration plan discussed

	☐ Vision SMS not available during downtime, also all Vision credits to be used as much as possible prior to Migration downtime ☐ GP Federation appt system: Practice signed into Vision 360 (web based) Practice to select date and select "Special booking" Practice to fill in "comments section with Patient name, DOB and Practice name" Practice to complete a Transfer of Care record making note of appointment date on the document and email to kashia.ahmed@nhs.net with Caitlin Hill cc'd in, Caitlin.hill3@nhs.ne Patient attends appointment and consultation notes are then sent back to the practice to be scanned into patient record when EMIS is switched back on OOH/EWH email over OOH report to practice who then copy and paste into EMIS when live: email transfer of cares be sent to, kashia.ahmed@nhs.net with Caitlin Hill cc'd in, Caitlin.hill3@nhs.net.
10 weeks pre go-live	☐ Process around dispensing discussed; repeat dispensing process, how to manage acute prescriptions during downtime, agreements with local pharmacy for acute prescription pick up and comms to patients ☐ Third party suppliers process with regards to migration to be discussed with regards to when the links will be switched off, work arounds during downtime and how they will be re-established (bloods; manually and getting paper results via red bag) to now include Radiology Dept, info included in 3rd party doc. ☐ Practice to be informed of the process around Extended Working Hours, Graphnet and Informatica which will be off line for 2 weeks post go live ☐ Ask Practice to supply a list of all 3rd Party applications they have installed: Scriptswitch, DXS, Lexacom, etc ☐ EMIS to be installed on all devices ☐ GMSS Project Manager to obtain Mnemonics from labs and send to the practice. These Mnemonics are to be used by practice when it configures T-Quest with EMIS trainers
8 weeks pre go-live	☐ Practice should have completed the data checking and signed off he agreement ☐ Practice to identify how they will capture clinical activity during down-time and process for ensuring the activity will be recorded onto EMIS

	☐ Practice informed AskMyGP remains active during downtime and can be used for web messaging with patients
	☐ iPlato will remain active during downtime for SMS
	☐ Data Quality; the list of referral templates from the data quality team is to be shared with the practice, practice to assign Claire Mayall and Andrew Kinsey as staff members to allow them to upload the EMIS referral templates on go-live day, the practice to book in an hour's slot with the data quality team for the week after go-live week to show referring staff how to make a referral on EMIS
6 weeks pre go live	☐ The timeline for clearing out electronic messaging pre down time (including Docman, lab results and spine activity) to be discussed
	☐ Discuss process re practice stopping new patient registrations (Search patients using Vision online and inform patients via SMS and change website content.) Online registration would change depending on whether the practice use Vision Online or NHS App?
	☐ Practice to use up Vision SMS allowance pre downtime
	☐ Process re smartcards to be discussed; an audit is sent from GMSS which the practice needs to check practice users against. This needs to be sent back to the RA team by the practice and inform GMSS Project Manager when complete
	☐ Practice activity during downtime to be discussed: skeletal clinics are to be run during down time and for the two days post go-live, block out every 2nd or third appointment for training/access
	☐ Electronic links will be switched off the day before downtime meaning the practice will be using manual processes for bloods, blood results, acute prescriptions and referrals
	☐ Link to Emis article on Auto-filling for FIHR: https://www.emisnow.com/csm?id=kb_article_view&sysparm_article=KB0065245
4 weeks pre go live	☐ All practice staff to be on site on go live day 1 and go live day 2
	☐ All practice staff to bring in their laptop devices for configuration with other devices and for configuration with Docman on go live day 1 and go live day 2
	☐ What to expect on go live day 1 to be discussed; EMIS engineers will be present on-site from 7:30am. EMIS trainers, GMSS Engineers, GMSS Project Manager will be on site for go live day 1 and go live day 2

	☐ There will be training for practices on the Pm of go live day 1
	☐ A trainer from EMIS will be floorwalking in the practice to support practice staff on go live day 1 and go live day 2
	☐ The practice is to supply a list of all the rooms in the practice; access will be required to all rooms to set all the devices including desktop computers, printers etc up
	☐ Superusers are to be focused on liaising with EMIS trainers/ engineers
	☐ EMIS helpdesk number shared and priority support for practices to be discussed
2 weeks pre go-live: Go-no- go meeting	☐ Outstanding actions from previous sessions to be identified ☐ Practice/ GMSS to have the opportunity to change their EMIS migration date if it is not felt to be clinically safe to proceed
1 week pre go-live	☐ Outstanding actions to be identified and addressed ☐ Plan for go live day 1 and go live day 2 to be re-visited ☐ Numbers to be exchanged for emergency contact; NOTE: the super user's direct line to be exchanged not the practices generic number ☐ GPAD Setup