



Bath and North East Somerset,
Swindon and Wiltshire Partnership
Working together for your health and care



ICR Update

March 2022



March Summary

Data Currently Being Shared

Next Feeds Going Live

Summary & Timeline Views

Clinic Letters at RUH

Care Plans

Feedback from ICR Users



March Summary

- ✓ **Newly Available:**

- ✓ Wilts/Swindon Community
- ✓ RUH Clinic Letters
- ✓ Timeline & Summary Views

- ✓ **Testing in Progress:**

- ✓ Salisbury Foundation Trust
- ✓ Medvivo
- ✓ GWH Phase 2 clinical correspondence, (path and rad)
- ✓ AWP access to ICR
- ✓ Maternity PHR

- ✓ **Kick off:**

- ✓ Wiltshire LA



Data Currently Being Shared to the ICR

GP Data*

(81 out of 90 BSW practices are live)

Nightly Feed of data recorded

locally:

- ✓ Demographics
- ✓ Immunisations
- ✓ Medications
 - ✓ Referrals
- ✓ Active & Past Problems
 - ✓ Allergies
 - ✓ GP results
 - ✓ GP Encounters
 - ✓ Contraindications
 - ✓ Operations
 - ✓ Radiology
 - ✓ Investigations
 - ✓ Family History
- ✓ Pregnancy, Birth & Post Natal
 - ✓ Contraception & HRT

Community – WHC & Swindon:

Nightly Feed:

- ✓ Inpatient Activity (wait list, admissions, transfers)
- ✓ Outpatient Activity (referral, appointments, attendance)

BaNES LA

Nightly feed:

- ✓ Demographics
 - ✓ Referral
- ✓ Event data including: Assessments, Safeguarding, DOLS
 - ✓ Care Plans
- ✓ Service Provisions including non-plan service provisions
 - ✓ Alerts
 - ✓ Disabilities
 - ✓ Practitioner
- ✓ Classifications i.e. support reason



Data Currently Being Shared to the ICR

RUH

Real Time Feed:

- ✓ Inpatient Activity (wait list, admissions, transfers)
 - ✓ Outpatient Activity (referral, appointments, attendance)
 - ✓ Clinic Letters and Correspondence
 - ✓ Pathology results,
 - ✓ Radiology reports
- ✓ Emergency Attendance
- ✓ Discharge summaries
 - ✓ Flexi cystoscopy & Sigmoidoscopy results
- ✓ Colonoscopy Results
- ✓ Gastroscopy result

GWH

Real Time Feed

- ✓ Inpatient Activity (wait list, admissions, transfers)
- ✓ Outpatient Activity (referral, appointments, attendance)
- ✓ Emergency Attendance

Community (BaNES)

Nightly Feed:

- ✓ Demographics
- ✓ Immunisations
 - ✓ Diagnosis
 - ✓ Medications
 - ✓ Referrals
- ✓ MIU Data (Paulton)

AWP

Real Time Feed:

- ✓ Demographic information
 - ✓ Allergies
- ✓ Inpatient stays – Admission, Transfer, Discharge and Leave events
 - ✓ Referrals to community teams
- ✓ Appointments – Planned and past
- ✓ Care Coordinator name and contact details
 - ✓ Crisis, Relapse and Contingency Plans

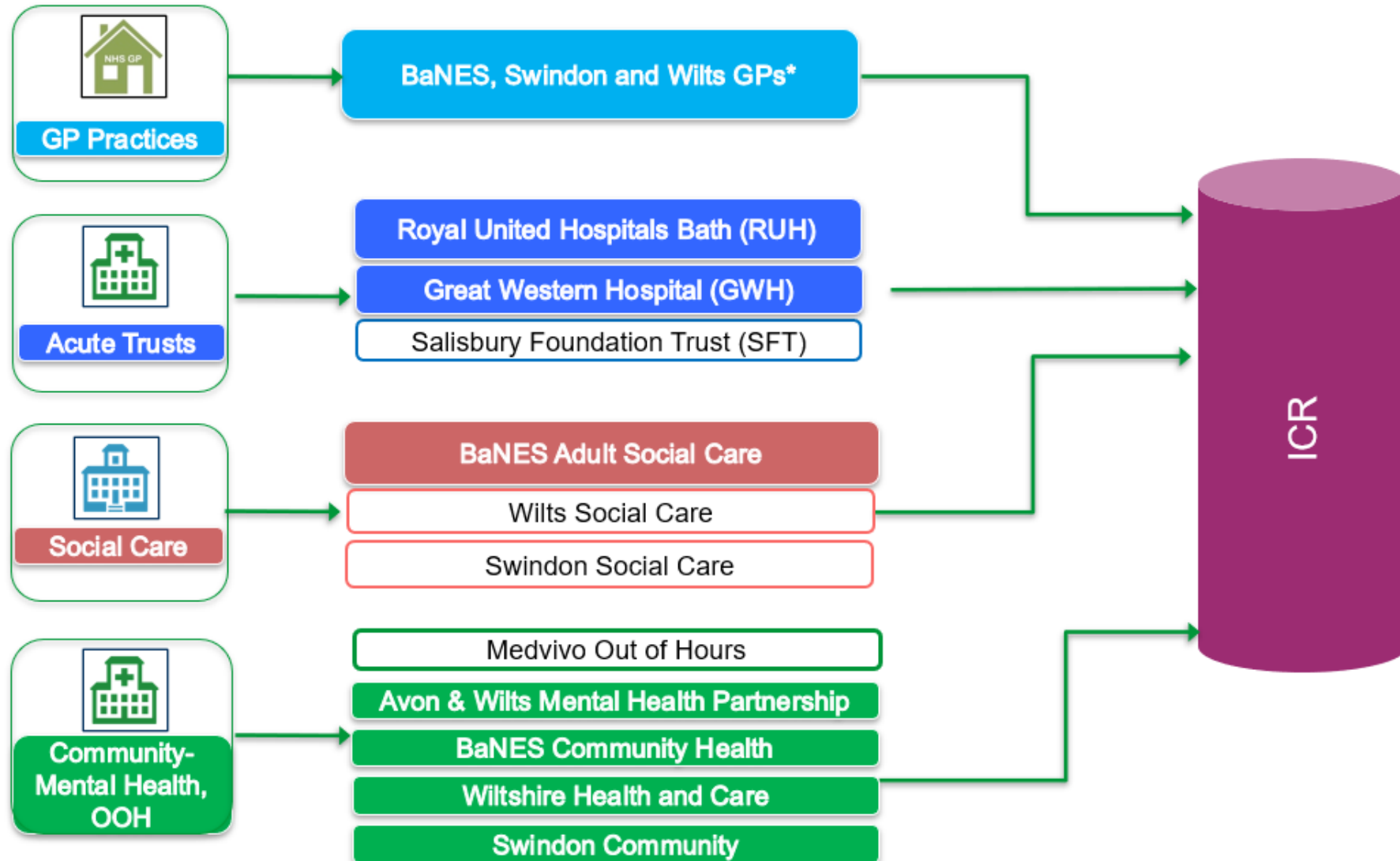
Overnight Transfer:

- ✓ Perinatal Care plans
- ✓ Inpatient Discharge Summaries

Live

Underway

BSW Data Feeds – current status



* 6 GPs outstanding & 3 out of scope

BSW Upcoming Data Feeds - timescales

TBC:

GWH Phase 1
Primary Care
AWP



Medvivo
Nightly feed



GWH
Real Time Feed
Phase 2



Community: WHC & Swindon
Nightly feed
Phase 2

Swindon LA
TBC

2021

Jan 22

Feb 22

Mar 22

Apr 22

May 22

Jun 22

Jul 22



Community: WHC & Swindon
Nightly feed
Phase 1



SFT
Real time feed
Phase 1



Wilts LA
Nightly feed
Summer '22 (TBC)



Feed live

Feed in
development



Planned / Underway March onwards

GWH

Phase 2 (Starting end Oct '21)

- ✓ Pathology results
- ✓ Radiology reports
- ✓ Discharge summaries
- ✓ Clinic Outcome Letters
- ✓ Endoscopy Reports
- ✓ Gastroscopy Reports
- ✓ Cardiology Reports

Community – WHC & Swindon:

Phase 2 : TBC, potentially:
Vaccinations, Medications, (TBC)

Medvivo:

(Oct '21)

111, Out of Hours, Urgent Treatment Centre activity.

SFT:

Phase 1 (Nov '21)

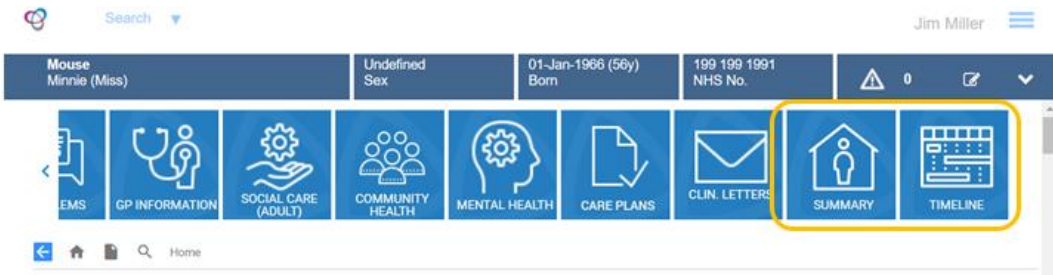
- ✓ ADT
- ✓ Demographics

Wilts LA:

TBC

Summary & Timeline Views

Summary and Timeline features are now live in the ICR. Based on the BI data views of the citizens on Carecentric and provide a useful “one pager” (Summary) and a high level overview (Timeline) to the professional.



Summary
Summary view shows activity in the last 12 months from BW Primary care (GP appointments, long term conditions), Acutes (IP and Outpatient as well as AE activity) and Community Services (open referrals). This view also shows future GP appointments

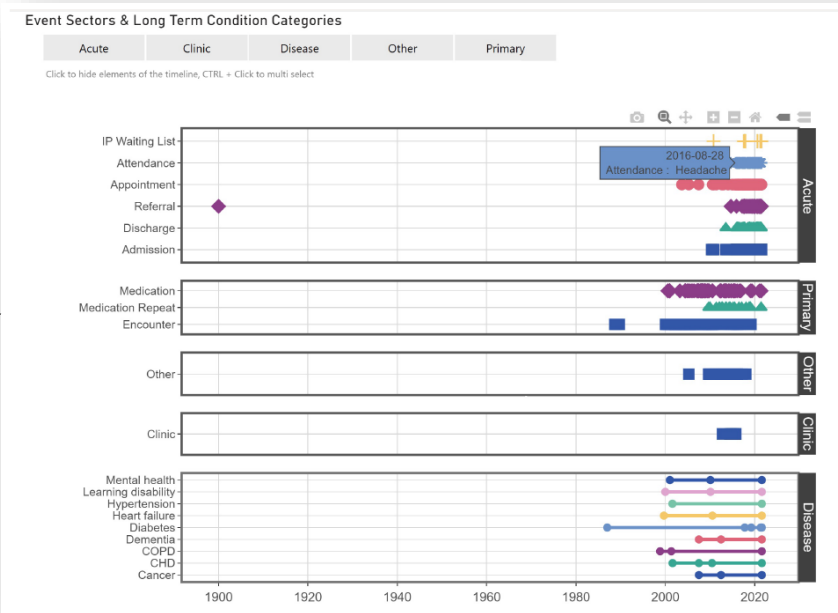
Timeline
This report enables a clinician to view patient events in one place and includes events from primary, acute care, community and mental health as well as long term conditions.

Patient Summary Please use Primary Care Activity & Future Appointments with caution as due to coding issues may be underestimated.

CareCentric View

ACTIVITY (LAST 12 MONTHS)		LONG TERM CONDITIONS		DNACPR STATUS	
Activity	Count	Condition	Years Since		
		Diabetes	2	DNACPR status (not recorded by GP) Treatment Escalation Plan (not recorded by GP)	
TREATMENT ESCALATION PLAN					
				3rd party awareness	(not recorded by GP)
				Anticipatory drugs	(not recorded by GP)
				Aware of diagnosis	(not recorded by GP)
				Aware of prognosis	(not recorded by GP)
				Care Plan	(not recorded by GP)
				GSF	(not recorded by GP)
				Place of care	(not recorded by GP)
				Preferred place of death	(not recorded by GP)
OPEN COMMUNITY REFERRALS					
Team Referred To	Referral Reason	Referral Date			
NEWS2 (LAST 3)					
Date	Score				
FRAILITY					
Rockwood Score (not recorded)					
FUTURE APPOINTMENTS					
Appointment Type		Date			

Graphnet
Improving Care





Clinic Letters at RUH

Clinical Correspondence at RUH is now available on ICR for all clinics where letters are sent to other providers

The screenshot displays the ICR interface for a patient named TOM TEST-TESTPATIENT. The patient's details include Male Sex, 12-Apr-1990 (31y) Born, and Not recorded NHS No. The interface features a navigation bar with icons for LS, ACTIVITY, PROBLEMS, GP INFORMATION, SOCIAL CARE (ADULT), COMMUNITY HEALTH, MENTAL HEALTH, CLIN. LETTERS, and CARE PLANS. The current view is 'Home > Clinical Correspondence'.

The clinical letter content is as follows:

Royal United Hospitals Bath NHS
NHS Foundation Trust

Combe Park
Bath
BA1 3NG
Switchboard: 01225 428331
www.ruh.nhs.uk

Private & Confidential
TOM TEST-TESTPATIENT
15 Barton Green
Barton Hill Road
BRISTOL
BS5 0AS

Oliver Dando
APLEY HOUSE
ROYAL UNITED HOSPITAL
BATH
BA1 3NG

Clinic Date:
Date Typed: 02-MAR-2022

Patient: TOM TEST-TESTPATIENT
DOB: 12-APR-1990
NHS No:
MRN: 2176854

Dear Dr Test,

THIS IS A TEST LETTER. PLEASE IGNORE.



Care Plans in ICR

- ✓ Direct Entry care plans accessible from within the ICR
- ✓ Ability to assess, monitor and manage frail and/or EOL patients with input from primary, secondary, community, mental health and social care.
 - ✓ Will contain high level information for all clinicians involved in a patient's care to access

EOL (Swindon)

Pilot taking place in Swindon target EOL (EPaCCS) care plan creation for patients in Prospect Hospice, GWH Palliative Care inpatients and those on the GSF framework.

The EOL module offers the ability to record information concerning

- DNACPR decisions
- life sustaining treatment decisions
- anticipatory medications
- contingency plans including symptom control advice and management plans
- GSF components
- preferred place of care & death

Frailty (BaNES)

Pilot started in December with Frailty care plans now being created for Paulton Hospital patients, shortly extending to RUH patients seen by the Frailty Flying Squad.

The pilot is focusing on 5 forms of the Frailty Module for PDSA:

- Functional Assessment
- Cognition
- Care and Support
- Life Style and Environment
- Frailty

ICR User Feedback

Feedback from Tom Bellfield, care coordinator for St Chads and the highest user of the ICR in primary care.

“ ICR invaluable in allowing a better more holistic view of the patient ”

Use Case: Tom manages a varied client list and takes referrals from clinicians and self referrals to manage non-medical issues. Finds the ICR invaluable in allowing a better more holistic view of the patient:

- Ability to locate patients
- Getting information before it lands in SystemOne (letters/documents). Normally any documents that go to primary care gets sent to scanning. This can lead to a delay of processing.
- Finding out more about a patient/client - which organisations are involved, how often do they access services etc.

Tom feels the most important part of the ICR is the documents section

Benefits:

- Using the ICR gives a better quality service to the patient
- Saves time phoning different organisations e.g. hospital
- Real world example of pharmacy calling the practice about a very vulnerable patient who hadn't picked up their meds for 6 days. Normally this would have resulted in the practice trying to call the patient and if no response contacting the police. However by looking on the ICR they saw that he'd been admitted and saved an awful lot of time and hassle.