healthcare gateway

Connecting you to real-time patient data from any care setting

Product Roadmap

Sarah Dunwell – Product Manager

Product Roadmap

Welcome to our Product Roadmap

- How to use this board
- We need your feedback
- Our product development process
- Partner dependencies

What’s Next?

- Subject to change
- Description of activity done
- Reasoning for development

SNOMED Clinical Term transition

- Clinical terminology language replacing Read and CTV3 in GP clinical systems
- Align our systems to SNOMED
- Dataset review
- Supplier interaction
- Impact views and data
- Communications

SNOMED Clinical Term Transition

Patient data

Please note the patient data being viewed may not be the complete patient record. For a detailed list of the clinical codes included please click here.

Date	Problem / Detail
05-Feb-2018	Shingles
07-Aug-2017	Diabetes mellitus
01-May-2017	Background diabetic retinopathy
01-May-2017	Diabetic neuropathy

SNOMED

Read

FHIR Interface Support

- Fast Healthcare Interoperability Resource (FHIR) is an interoperability standard for electronic exchange of healthcare information.
- Discussions with NHS Digital about their initiatives
- Attending sessions to understand resources available in FHIR
- Communications with vendors

Performance Monitoring and Reporting

- Internal development to systems
- Produce more comprehensive reports on performance
- More comprehensive reports on usage

Coming Soon

- Items currently in development
- Monthly updates
- Colour coded to represent development stage

Enhanced MIG

- Internal Enhancements
- Updating our operating system to Linux
- Upgrading our application framework to support a Java platform
- Changing our database to improve monitoring and reporting.
- Improvement of transaction speed from 3 to 1.2 seconds

MIG GP Consuming Portal

- Enables HCP to view Detailed Care Record and datasets within EMIS Web
- Data seamlessly integrated within the EMIS Web GP’s clinical system
- Reduces duplication of effort logging into separate clinical systems
- First of Type testing

MIG Management Portal

- Internal Configuration tool
- Configuration Wizard to automate some of the configuration process
- Free up development resource
- Improve efficiency and accuracy

It’s here

- List of recent developments
- Brief overview
- More information on website

Document Services

Teleologic Dataset

Deselect Patient

Miss Linda Wilkinson

Primary Identifier (NHS)	Gender	Date of birth
6424561811	Female	04/02/1939

Views

Teleologic Test Hospital (T0(

Hospital Views

- Summary
- Problem
- Diagnosis
- Medication
- Procedure
- Patient Details
- Allergies
- Letter
- Form
- Visit

Patient data

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Co-morbidities, Allergies and Medication from most recent Discharge Summary

Co-morbidities

Essential (primary) hypertension

Insulin dependent diabetes mellitus

Allergies and Adverse Reactions

Pollen : Sneezing

Medication

Drug	Dose	Frequency	Route	Supply	GP Continue
Chloramphenicol 1% eye ointment	1 drop	At night	Right Eye	Ward	No
Maxidex 0.1% eye drops	1 drop	4 times a day	Right Eye	Ward	No

Provenance Data

Last medication update 04/07/2017 11:23

Servelec RiO feed of data

Demographics | Admission Details | Medicines Reconciliation | Referrals | Medical Progress Notes | VTE Outcome | Documents

Medical Progress Notes

Date	HCP Name	Note Type	Significant Note	Risk	NoteText
5 Feb 2014 13:44:00	Ikram Law	Physiotherapy	No	No	Telephoned, TENS not very effective and would like to see physiotherapist again as soon as possible. On holiday for a week and so will ask G Lane to arrange this.
5 Feb 2014 13:40:00	Ikram Law	Physiotherapy	No	No	Suitable for TENS. Advised normal mode, pulse=80, width 50/60 and adjust accordingly. Timings and use discussed. Will return in 2 weeks for review. Advised to continue analgesia.
25 Mar 2012 12:05:00	Eden Quinn	Dietetics	No	No	BMI 41.62.Has been overweight for last 10 years, diagnosed diabetic 5 years ago. Full assessment completed. For low fat diet.
25 Mar 2012 12:00:00	Eden Quinn	Dietetics	No	No	BMI 41. Overweight for last 10 years , diabetic for last 5 years, tablet controlled. Raised HBa1C ? for insulin next gp visit therefore keen to lose weight.Full assessment performed, diet discussed, to commence low fat diet.Excercise regime also given. Review 2 months. Advised to contact clinic if any concerns.
20 Sep 2011 12:53:00	Kevin Sanders	Occupational Therapy	No	No	Home assesment perfomed, form completed. For total knee replacement in 1 week. Able to perform all functions with no problems at present, uses crutches to mobilise at times. Relative will be staying for 1 month following discharge and so feels will be able to cope with activities of daily living with their assistance . Supplied with raised toilet seat and bath board. Perching stool ordered.
20 Sep 2011 12:54:00	Kevin Sanders	Occupational Therapy	No	No	Patient contacted office as not yet received perching stool- will follow up.

How can you access the roadmap?

- Create account in Trello
- Send username to Healthcare Gateway Enquiries
- We will issue invitation to view the board
- Full details available on our website

Development Requests

- New ideas for consideration
- Complete change request form
- Submit to account manager
- Roadmap meeting discussion
- Provide feedback on outcome

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Medical Interoperability Gateway Development Change Request Form

Development Change Request

Information Required	Details
Date of Request	
Title of Request	
Name of Requestor	
Details of change request (please give full details of development required)	
Reason for request (Please give business case, benefits to be realised etc by implementing this request)	
Why current solution is not acceptable (If there is a solution currently offered please give full details as to why this is not workable for your organisation)	
Has the requirements for this development request been captured in full (if not please detail current position)	
Supporting Documentation (please embed any documentation that supports this request	
Customer Name (where applicable)	
Is this an existing customer or potential customer?	