

**Greater Manchester Pathology Network – Priority Action Group – Meeting Notes/Report**

Priority Action Group 5 – IM&T  
 Monday 14<sup>th</sup> September 2009 11.00am-13.00pm  
 3.10, One Central Park, Northampton Road, Manchester, M40 5BP

In attendance			Apologies	
Alison Cartmill	AC	CMFT NHS Foundation Trust	John Ardern	CMFT NHS Foundation Trust
Dave Hctor	DH	CMFT NHS Foundation Trust	Paul Bishop	UHSM NHS Foundation Trust
Dave Johnson	DJ	Trafford Healthcare NHS Trust	Alan Blackley	HPA NW
Owen Johnson	OJ	X-Lab Systems Ltd	Mark Gillespie	The Christie NHS Foundation Trust
Laura Kidd	LK	GM Pathology Network	Howard Gray	NHS Stockport
David Lee	DL	Royal Bolton Hospital NHS Foundation Tst	Keith Hyde	GM Pathology Network
David Money	DMo	Tameside Hospital NHS Foundation Trust	Neil Jenkinson	GM Pathology Network
Drew Morgan	DM	X-Lab Systems Ltd	Steven McCann	Stockport NHS Foundation Trust
Rachel Pearson	RP	GM Pathology Network	Yoni Parshan	UHSM NHS Foundation Trust
Greg Rayner	GR	Salford Royal NHS Foundation Trust	Rick Pope	CMFT NHS Foundation Trust
Stuart Rogers	SR	Stockport NHS Foundation Trust	Jeff Seneviratne	GM Pathology Network
David Slater	DS	Pennine Acute Hospital NHS Trust	Peter Walsh	NHS Manchester
Gary Walton	GW	Pennine Acute Hospital NHS Trust		
Tim Winstanley	TW	WWL NHS Foundation Trust		

**Discussion Points**

- **Notes of 15<sup>th</sup> June 2009 meeting** – agreed as a correct record and there were no matters arising.
- **Cancer Reporting Solutions** – GR explained that NJ and JS met with Jackie Elliott and Dr Gordon Armstrong to discuss the cancer reporting solution GR has developed. The aim of the meeting was to discuss how to move forward as a Network and release GR's time to work on the project, the issue is GR reports to IT and not Pathology. The preference of SRFT was to get the system up and running live in-house and then roll it out to the Network. A business case has been prepared and information is still awaited from Salford. Once the business case is completed it will go to the Cancer Registry for the funds to potentially pay GR or for backfill.
- **Lab-2-Lab Project Update** –
- **iSoft** - DMo informed the group that both MRI and SHH now have VPNs installed and since Friday 11<sup>th</sup> September have been linked to the live servers. Problems occurred but the system is now stable and testing will be carried out this week. User guides will be available this week and DMo and DS will circulate. DMo will be responsible for all Telepath sites and will start to visit sites and organise scheduling for implementation. DMo will be visiting sites as every site needs to install a VPN, this is not a big job but involves IT staff resources which can be an issue. MRI have had a major Telepath upgrade on the weekend of September 12<sup>th</sup>/13<sup>th</sup>. SR was asked to give an update on SHH.
- SR informed the group that the update had gone well on the whole. There were some glitches, e.g. a successful day of testing followed by the system not working at all. SR explained that it would be nice to have a day where Tarun Mistry (TM) of X-Lab does not have to be contacted. SR stressed that the support received from TM has been excellent throughout the project. SR confirmed that SHH now need to undergo staff training. DS commented that he requires a full week of problem free testing before the system goes live w/c 28/09/09. OJ informed the group that X-Lab has installed listening software on the N3 connection that the system runs through. This means if the server goes down it will recover automatically. SR enquired about having a simple 1 page easy reference guide as the user guide supplied is extensive. SR also asked for clarification around the helpdesk process. DS asked X-Lab for a contact list of names and numbers for staff at SHH to be in place by w/c 28/09/09. DS formally thanked SR and AB and their teams for all their hard work throughout the project. DS noted that it has been very difficult and needed a lot of resources and commitment.
- DS informed the group that the annual maintenance cost for the Telepath interface is £1,675 per lab. This will be paid pro rata from date of go live.
- DMo confirmed that Paul Irvine is still working on the software for Apex.
- DMo confirmed that numeric data testing between Tameside and SHH will commence once MRI and SHH has gone live.
- **Clinisys** – CDM software is no longer part of the architecture. Point to point interfaces are being proposed. Clinisys have sent DS a specification which DS has commented on and returned. DS has asked for a quotation but to date nothing has been received.
- **Technidata** –DS confirmed a quotation has been received from Technidata. Microbiology is not being included at this stage as the current system involves paper requests being sent to MRI.
- OJ and DM left the meeting.
- **GP Order Comms** – DS informed the group that he had received an email from Indigo 4 to state that INPS will install software patches on 8 practices nationally so piloting can begin. Woodhead Surgery in Bury have agreed to be a pilot site

and DS has been assured testing will begin imminently. DS informed the group that a recent study has shown that one of the benefits of the GP requesting software is saving GP practices 2 hours per week on removing the work due to mismatched reports received electronically. Therefore 150 practices in Pennine equates to a saving of 300 hours per week. GW confirmed that Pennine has rolled out 80 practices out of 150. DS updated the group that issues with INPS DLM280 had held the project up. SR confirmed Stockport have completed 95% of the sites that can be done. SR also confirmed there has been no progress with Microtest and Premier. TW confirmed that Wigan have rolled out 15 Emis sites but have 2 fringe Emis sites. One of the fringe GP sites has an Anglia system and has received patches from Halton and Wigan so can now choose to send requests to either. TW confirmed he will be carrying out training there and that in general WWL are 25% complete. GR confirmed that Salford have 3 Emis pilot site about to go live. GR informed the group that secure web certificates are needed and the URL needs to be changed. SR commented that Stockport had experienced the same issues and Emis had sorted everything so GR agreed to chase Emis. DJ confirmed that Trafford have 2 sites live, Emis sites will be live by the end of October and this equates to 45% of their target.

- AC and DH informed the group that Central Manchester Trust have problems re: Governance. AC explained that the IT department are currently deciding whether to re-configure the project to use the Trust Integration Engine (TIE) or to stay with the current messaging architecture. This decision is imminent and should the decision be to use the TIE then this will introduce a significant delay to the project. DS enquired if the group all understand what the governance issues are surrounding the problems at CMFT. The group confirmed that they were all aware of the issue of prohibiting GPs from having access to secondary care information should the patient request this.
- TW commented that he has been surprised that there is not a 100% uptake of GP order comms and asked the group if sharing this information is of any benefit. The group agreed it would be good to know why some practices use the system 99% of the time and some only 10%. DS stated that this can be combated at training level with the introduction of the new forms to the practice as part of the training process and the removal of all old forms. Check after a few weeks that the practices are using the system, if not, contact the PCT trainers and return to the practice. DS also stated that once a Pennine GP practice completes training DS informs the stationery department and stationery only send that practice the new form.
- HMD IT System – DS explained that this project is due to go live 25<sup>th</sup> November 2009. The servers are on order and will be installed early October 2009. DS explained the project will have two phases. Phase1 Lymphoma and Phase 2 Leukaemia. DS explained that the users will log into the system and see a dashboard. There will be a new request button, progress of sample and new results to be viewed.
- GM LIMS Business Case – DS explained that both the GM ICT Programme Board and the GM Pathology Network Board have agreed to the commissioning of a business case for a GM LIMS system. The TOR will be written in the next week and a project team and board is currently being established. The project team will require a representative from each of the NAG disciplines and some of the members of this group will be asked to attend.
- The deadline for the business case is Feb 2010 as if this is then accepted and the project progresses the funds need to be included in the financial year beginning April 2010. SR enquired who will write the business case and DS explained he will write it with the information gathered from PAG 5 members, the project board and team.
- DS went on to explain that the remit is for 1 lab system to be provided by 1 supplier that all GM labs log into. It means that the benefits to the patient would be huge, for example, a patient in Bolton diagnosed with cancer could then be referred to The Christie for treatment and all patient results/information would be instantly available. DMO interjected that Wales and Medway & Kent are also looking at procuring a single LIMS system so we can follow their progress to see if it is achievable. RP enquired if any of the Trusts present have contracts up for renewal imminently. The group briefly discussed some of the other aspects of a single LIMS system and RP pointed out the business case is a 5 point business case and all elements will be investigated including the risk of having one system. RP also reiterated that the Network is in close contact with Wales to share their learning and progress. Wales have gone to tender had 6 suppliers shortlisted and whittled that down to 3. SR enquired if this Board will wait to see the outcome of the National Programme. DS explained that Howard Gray (HG) who is taking over Peter Walsh's place on this board is heavily involved in the National Programme and will steer the business case in the appropriate direction.
- The group discussed the current situation and agreed that the legacy systems in place are all 10 – 15 years old and will need to be replaced soon no matter what.
- **Any Other Business** –
- IBMS CPD Certificates – were available
- Primary Care Listening Event – RP informed the group of the event planned for Wednesday 7<sup>th</sup> October 2009 at Bredbury Hall Hotel & Country Club in Bredbury. The aim is to hold a series of presentations and workshops and engage with Primary Care.
- Sequel Map – GR informed the group that Salford have just purchased Sequel Map and asked for the groups views. SR stated he had requested a quotation and suggested he and GR meet outside of this meeting to discuss it further. GR confirmed the cost is in the region of £10K and SR enquired for what purpose Salford had purchased Sequel Map. GR has been tasked with mapping information into a data warehouse.

**Actions**

- DS and DMO to circulate user guides
- X-Lab to provide clarification re: Helpdesk process and a list of contact names and numbers to be in place at SHH by w/c 28/09/09

**Recommendations to the Greater Manchester Pathology Network Board (if any)**

- None

**Date and Time of Next Meeting**

Monday 16<sup>th</sup> November 2009, 11.30 am, One Central Park, Northampton Road, Manchester M40 5BP