



SystemOne GP Case Study - Dyneley House Surgery, North Yorkshire & York PCT

Introduction

In April 2007, Dyneley House Surgery went live on SystemOne GP - the first practice in the region to do so.

SystemOne is being deployed as part of NHS Connecting for Health's National Programme for IT (NHS CFH NPfIT).

The vision of NHS Connecting for Health and of SystemOne's developers, TPP, is to create a computer network linking every clinician across the country, meaning that wherever a patient needs care a full patient record is available.

Background

Dyneley House Surgery is a semi-rural GP practice with 11,500 patients. It is the first practice in the former Craven, Harrogate & Rural District Primary Care Trust (now part of North Yorkshire & York PCT) to Go Live on SystemOne.

The surgery is unusual in that its patients cross PCT boundaries, with patients registered with North Yorkshire FSA, Bradford and East Lancashire. "90% of our patients go outside of our PCT boundary to go to hospitals," says Lynn. "SystemOne is good for us because it follows our patient flow. Acute trusts, community physicians, child health and out-of-hours services in the region all use SystemOne. That's a huge benefit."

Choosing a system

The legacy system used by the practice was no longer effective for Dyneley House. "Our legacy

system was written originally for Health Authorities, GPs and hospitals. Its numerical base for practices was low. The system works well for practices with around 6,000 patients, but we have almost twice that and so it was no longer suitable. We knew we needed to make changes and that we should do that as early as was manageable."

"Last year, we looked at what was available independently. We had internal demos of both SystemOne and EMIS. We have around 60 staff and all of them were asked for their opinion. There was only one opinion - 'When can we have SystemOne?'"

"SystemOne is good for us because it follows our patient flow. Acute trusts, community physicians, child health and out-of-hours services in the region all use SystemOne. That's a huge benefit and we didn't want to lose our links with them, particularly Child Health. We're a big believer in SystemOne strategically and hope that our progress will make decisions easier for other organisations in the area."

Delivering the solution

The Practice Manager Lynn Knowles, IT Manager Heidi Edmondson, and GP lead Dr Andy Bundock led the deployment from the practice's perspective.

As an already paperless practice, Dyneley House's deployment had unique challenges: "We've been letter scanning since the mid-90s," says Lynn. "The size of our

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Heidi Edmondson, IT Manager



Left to right: IT manager Heidi Edmondson, GP clinical system lead Dr Andy Bundock, Practice Manager, Lynn Knowles.

With over 1,200 healthcare units in England and Wales using SystmOne, including GP, Child Health, and Community organisations, and with many more deployments in the pipeline, the vision of integrated patient care is fast becoming reality.

Working with the NHS, clinicians and other healthcare professionals, TPP is moving towards achieving the SystmOne vision: one patient, one record.

scanning data was as big as our patient data - we had over 90Gb of data to transfer!"

In addition to the large amount of scanning data, Dyneley House also required a lot of data to be transferred that wasn't Read coded. "We wanted to know whether TPP and the LSP had migrated any other large practices from the same legacy system as we used - they had in a different area. I had a long conversation with the Practice Manager at that other surgery and was impressed with how it had worked for them. We knew that we would be more awkward though, because we had a lot of data that wasn't Read coded."

On Go Live day, the team worked hard to check their data was correct. Lynn says, "We had very few issues because we did a lot of data checking. By 1pm on Go Live day, we'd checked the patient base, and by 4pm we had checked the GMS part."

Lynn continues: "The deployment was well-planned, we did a lot of data checking and we were well supported by TPP, CSC, the PCT, and SHA. The trainers from TPP and the SHA were excellent, accommodating our changes and wishes. The PCT business manager, Henrietta Byrne, has been very good - she has had hands-on experience of SystmOne and also knows us and how we work. In terms of technical support, Geoff Bowden at the SHA gave great assistance in upgrading us to be able to accommodate SystmOne."

Benefits

Dyneley House Surgery is already seeing the benefits of integrated care with the electronic transfer of patient records. IT Manager, Heidi Edmondson, says, "We've had cases where the full patient record comes through instantly on registering a new patient. That's ideal for a clinician - they can see what's happening for themselves, rather than relying on what the patient can tell them." And the benefits extend beyond record transfer from one GP to another: "If a patient is seen in another unit, for example in Out-of-Hours or at the Diabetes

Centre, we know about it instantly. Previously, we had to wait 5-6 days for a letter to come through but now the information is there straightaway - from a patient care point of view, that's amazing!"

"Being a hosted system is very beneficial," says Lynn. "We use Spine for patient demographics, and appreciate the links we have with the acute hospital, child health, and external care such as diabetes and palliative care."

Lynn continues, "Since we started using SystmOne, the information we are handing out to patients has improved in clarity. The information on prescriptions is clearer, and the letters we distribute are more patient-friendly. That's another great benefit - if we can make information patient-friendly, we'll generate a much better response."

Lynn has this advice for other organisations making the move to SystmOne: "We went live on a Friday and had nine days' worth of data to input since the final cut had been taken - it was invaluable to us to have some patient downtime and be able to use that time to get up to date, and to get to grips with the system. We used that time as a training exercise. Everybody worked very hard over the weekend to make sure we were ready when the patients came through the door on the Monday morning. Since then, we've just been getting on with it and there is nobody who is not using it!"

Future

Looking to the future, Lynn says, "We're all learning, sharing our knowledge in-house, and finding ways of doing the things we want to do! We are looking forward to learning more about the system and to using SystmOne to analyse our data in order to improve data quality. Our clinical care has always been excellent but our data quality didn't match - now we hope to change that."