

## NHS Low Calorie Diet Programme Troubleshooting and tips to support EMIS search and invitations

## **Problem/Concern Possible solutions** Firstly, check in Resource Publisher that the document that you have imported has been marked as completed and not still as Draft. Published Date Modified Document templates 2WW Gymaecology RUH 66-May 2021 SNOMED CT Imported item. Document Template No Complete BEOXINGTON FAMILY PRACTICE 2WW Haematological Cancer 2ww RUH Imported item. SNOMED CT Document Template No 20-Sep-2021 Complete Admin (Sam). Admin letters 2WW Head and Neck Cancer RUH Document Template No. 18-Feb-2022 Death SNOMED CT Admin TCIs 2WW Lower GI Referral (RUH) 12-Jan-2022 SNOMED CT Document Template No Cervical Screening letters 2WW Lung Cancer Proforma Document Template No. 20-Sep-2021 Chronic Disease Reviews 2WW Skin Cancer RUH SNOMED CT Imported item. Document Template No 20-Sep-2021 2WW Suspect Breast Cancer RUH Imported item. Document Template No 20-Sep-2021 Complete SNOMED CT District Nurses Document Template No. SNOMED CT 20-Sep-2021 Complete DO NOT USE - archived old forms. Document Template 2WW Upper Gastro-Intestinal Cance. SNOMED CT 20-Sep-2021 Complete Doctors Common Forms I have downloaded the 2WW Urological Cancer RUH 20-Sep-2021 Complete SNOMED CT Doctors Common Letters M Archive ADHD Scale Tool (1).docx 29-Mar-2022 Complete N/A ICS Audit Letters **Referral and Medications** & Ambulatory Care Clinics referral fors Copy 07-Aug-2020 a... Document Template No Complete SNOMED CT Insurance Reports Remedies Policia Polic Document Template No 04-Aug-2021 Adjustments Form (RMAF) Orphaned Migrated Document Templates Document Template No 20-Sep-2021 Complete N/A Practice Nurse Letters but cannot access it from Autism Spectrum Service Adult(Som. Complete Document Template No. 20-Sep-2021 Reception: SNOMED CT Bath Breast Imaging Services (Private) Imported item. Document Template No. 30-Jun-2020 Complete sarah templates the patient's notes F Bath Radiology Group (Private) Circle/ - Imported item Document Template No. SHOWED OT Secretaries 2ww Suspected Sarcoma referral form Telehealth When a document is imported into Resource Publisher, the default is for the document to be set as a Draft, in which case the document will not be visible if someone looks for it via the search function or if searching in Resource Publisher, only you will be able to see it. Once marked as completed, you will be able to find the document via the search, although you may need to go find it via clicking on the folders rather than searching for the name, you should then be able to see the document although you may need to log out of Emis and log back in to find it. When you open Resource Publisher on EMIS you need to open the 'Document templates' section on the left-hand side menu and find the folder you want to save the document. You should then be able to save the extracted (unzipped) document into this folder in the correct file format. I have saved the extracted EMIS search file into a folder in 'Protocols & Do not try to upload the document in the 'Protocols and Templates' section. This folder only allows you to Templates'. However, view XML (search) type files, you will not be able to view or upload the extracted EMIS document this way. when I open the folder to try and import the Protocols & template document file into EMIS, Document templates the file formats for Concepts documents are not visible. Library items The return on search numbers for practice appears to vary widely and may be affected by demographic variability in local practice population. For example, some practices are returning 10-15 patients, whereas another practice, using the same search might return 70-90, with only slightly larger practice size. If a significant number of diabetes annual follow up appointments have been missed because of genuine reasons e.g. COVID or illness, then these patients will be excluded from the search (as one of the criteria is for them to have attended follow up in the last 12 months). There is a possibility to run a search with this The search has returned less patients than criteria for follow up extended to 18 months. This may be helpful if you feel a significant number of patients may have been unable to attend their follow ups because of genuine reasons and may be suitable expected and motivated patients for the programme. If you would like a version of this search please contact <u>lesley.harper1@nhs.net.</u> It may be worth noting that patients who are diagnosed after the search, or whilst awaiting confirmation of their diagnosis e.g. results of a second HbA1c to confirm diagnosis, will not be picked up on the search. You may wish to add these patients to your invitation list when their diagnosis has been confirmed.

Problem/Concern	Possible Solutions
The search has returned large numbers and there are concerns about how to manage these	<ul> <li>To make the process of invitations and initial consultations/discussions with patients more manageable for the practice, the following tips may be helpful:</li> <li>Consider breaking the list down into manageable chunks, e.g. 20 - 30 invitations to start, then depending on the level of interest from patients (those who are interested would usually respond within 7 days), this will help decide when to send the next lot of invitations.</li> <li>The rate of uptake we are seeing from patients who receive invitations is currently around 25-30% (not everyone will want to go ahead with the programme)</li> <li>You may wish to initially send invitations out to patients who are not on any diabetes or blood pressure medications, this may help reduce initial time spent completing the referral form (Please note: patients will still require a copy of the medications adjustments form, even if they are not on any medications or no medications adjustments are required)</li> </ul>
GPs are concerned about the time needed to complete the referral form with patients	The form can be completed by professionals other than a GP e.g. practice / diabetes nurses and/or pharmacists so long as the medications adjustments are signed off by a GP or someone they give authority to do so on their behalf.