	Commercial in Confidence	
	GP2GP Supplementary Specification	
NHS Connecting for Health	**Handling and Propogation on Non Consultation Data**	
	Programme	*NPFIT*	**DOCUMENT RECORD ID KEY**	
	Sub-Prog / Project	*GP2GP*	*NPFIT-PC-BLD-0133.02*	
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Subject	**Handling and Propagation of Non Consultation Data**
Reference	Test Director incidents (1975, 1981)
Supplier	General
Summary	Different GP systems may differ significantly in terms of the supported consultation model and content. For example

Within the Summary cell:

1. System A allows record entries to be made outside of consultations e.g. repeat medication issues, summary record entries while System B requires a consultation for all record entries.

2. System A does not normally show some record content within consultations e.g. medications but System B does.

The effect of these differences in GP2GP transfer is unnecessary degrade and instability affecting both immediate (A->B) and onward transfers (A->B->C).

In the case of system A real patient records may contain significant volumes of non consultation data e.g. medication issues.

GP2GP also requires that all clinical information is carried within compositions.

However at present there are no well defined mechanisms for specifying whether composition content should be displayed as a consultation which could be acted upon by a receiving system that supports non consultation data entry and display.

In A->B transfer non consultation data entries are displayed in B within consultations as this is the natural behaviour of the system. Systems like B which enforce an 'everything happens within a consultation model' will generally have mechanisms for making large numbers of consultations manageable from a user perspective (journal views, filters) therefore the appearance of large volumes of non consultation data in B within consultations should not be an issue. In B->A' transfer (back to another instance of system A) however non consultation data originally from system A will be displayed within consultations on system A'. This poses a number of problems e.g. users may not expect to see particular types of record content within consultations and a system which allows non consultation data entry may not have the features which make large numbers of consultations manageable for users. The end results are potential confusion, lack of clarity and in extreme cases clinical safety hazards due to information hiding.

The second related issue (1981) is that where systems A and B

	support different types of consultation content then unusual or non standard consultation content from A may be displayed in B which may cause instability in system B or further issues in onward transfer e.g. a system shows medication issues in consultations from an imported record but would not normally do this for natively entered information.
Detail	To address these issues it is proposed that the EhrCompositionName vocabulary is extended with the following SNOMED CT codes **196391000000103 Non-consultation medication data** **196401000000100 Non-consultation data** A system that supports non consultation data entry should carry non consultation data within ehrCompositions coded using these values. Compositions should be identified with the code 'Non Consultation Medication Data' where the composition contains non consultation medication management activities e.g. prescribing and medication issues. The code 'Non Consultation Data' should be used for all other non consultation record activity and in the case where a mix of both medication and non medication activity is carried out within the same consultation. A system that receives ehrCompositions coded with either of these codes should handle them according to the native behaviour of the system. A system that supports non consultation data entry should not display the composition and associated record entries within it's consultation view although it should import the associated record entries and make them available elsewhere within the application in the appropriate manner. A system that does not support non consultation data entry should treat these record elements like any other composition and make them available within the application in the normal manner. In the case of applications which do support non consultation data entry but have different conventions over allowed non consultation record content the native behaviour of the receiving system should be applied. The original composition types should be preserved in onward transfer i.e. a consultation received into a system via an ehrComposition coded as Non Consultation Data should be exported with the same code. Systems should apply native conventions to incoming consultation content. If an incoming record contains content that would not normally be shown within consultations then that content should not be shown within consultations at the receiver although the record content will be made available elsewhere within the application in the usual manner.
Examples	See Incident Reports

Terminology Status	Codes provide in this document are provisional and will be incorporated in official terminology distributions at a future date.
Thread	ABC Issue Resolution

Amendment History:

Issue	Version	Date	Amendment History
01	0.1	01/12/2005	First draft for comment
02	1.0	18/01/2006	Approved.

Forecast Changes:

Anticipated Change	When

Reviewers:

This document must be reviewed by the following. Indicate any delegation for sign off.

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Distribution:

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Document Status:

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Related Documents:

These documents will provide additional information.

Ref no	Doc Reference Number	Title	Version
1	NPFIT-SHR-QMS-PRP-0015	Glossary of Terms Consolidated.doc	<enter latest>

Glossary of Terms:

List any new terms created in this document. Mail the NPO Quality Manager to have these included in the master glossary above [1].

Term	Acronym	Definition