Call To Action: January 2022

Data migration from CMC to the Urgent Care Plan

Draft care plans, MyCMC patient requests and restricted records

Summary

The Urgent Care Plan (UCP) has been commissioned to replace the service currently provided across London by Coordinate My Care (CMC). All clinically approved CMC care plans will therefore be migrated to the Urgent Care Plan. However, there are some exceptions for those plans that are currently unpublished (drafts), which are detailed below. In order to ensure that care services are able to make the best use of care plan information from CMC, the following actions are required CMC users:

1. Please ensure that all draft care plans are finalised and published (i.e. clinically approved) **by 31st March 2022**. See Appendix A for instructions.

2. Please process all outstanding MyCMC patient requests by **31st March 2022**. See Appendix B for instructions.

3. Please contact patients who have a restricted record, to offer them the option for their record to be un-restricted by **31st March 2022**. With your permission, CMC are able to contact the patient to do this. See Appendix C for instructions.

Draft CMC plans, outstanding myCMC requests and restricted care plans will not be migrated to the Urgent Care Plan.

Introduction

London commissioners have procured a new digital supplier to create and share urgent care plans. This programme of work is referred to as the Urgent Care Plan Programme, led by the current pan-London (CMC) Collaborative Commissioning Group. This new technology will build on the success of Coordinate My Care (CMC). As part of the transition to the Urgent Care Plan, clinically approved CMC plans will be migrated to the new solution prior to go live. The Royal Marsden NHS Foundation Trust, host of the current CMC service, and South West London CCG, are working collaboratively to help ensure a smooth transition for patients and clinicians.

Clinicians are encouraged to continue documenting patient care plans on CMC until the end of the transition period.

Purpose of this document
The Urgent Care Plan, specified by stakeholders, will provide additional features to the current CMC system to make it easier to access care plans and to reduce duplicate data entry between electronic patient records and care plans. Whilst the majority of the features provided by CMC will be replicated in the new system, some of the features will be slightly

different. The purpose of this document is to advise you, as CMC system users, what you need to do to prepare for and manage these differences.

Actions are required for:
- Draft Care Plans
- MyCMC Outstanding Tasks
- Restricted Records

These required actions are detailed below.

1. Draft Care Plans

The CMC workflow supports the concept of draft and published care plans; draft care plans are incomplete works in progress, only care plans that have been clinically approved and "published" can be viewed by urgent care users.

The Urgent Care Plan will attribute the history of care plan edits to specified users. As there is no clinical accountability for draft care plans, only CMC published (i.e. clinically approved) care plans will be migrated from the CMC system to the Urgent Care Plan.

To ensure that your patients' CMC care plans are migrated to the Urgent Care Plan application, **you will need to ensure that all draft care plans are finalised and published (i.e. clinically approved) by 31st March 2022**. Any CMC patient care plans still in draft, whether the draft is the first version of a plan or an edit to an existing plan, will not be migrated.

For details on how to identify draft care plans for you and your organisation and to finalise and approve them, please see Appendix A.

2. The MyCMC Patient Portal

The CMC system includes MyCMC, the CMC patient portal, which enables patients to initiate their CMC care plan and, once they have a clinically approved care plan, to view and request changes to their plan. When patients initiate a care plan and request changes to their plan, these become tasks for completion in the CMC system.

The new solution will integrate with the NHS App and personal health records. To prevent patients continuing to use MyCMC to initiate their own care plans and request changes to their care plan as the UCP go-live date approaches, the MyCMC application will be withdrawn as of 31st March 2022. Therefore any outstanding tasks to process MyCMC care plan initiations and MyCMC requests for care plan change will not be migrated from the CMC system to the Urgent Care Plan.

To ensure that your patients' MyCMC care plan initiations and requests for care plan changes are not disregarded, **you will need to process all such outstanding MyCMC patient requests by 31st March 2022.**

For details on how to identify and process MyCMC care plan initiations and request for care plan changes from patients registered at your GP practice, please see Appendix B.

Patients with existing MyCMC user accounts will be contacted and advised that MyCMC functionality will no longer be available to them after this date, outlining the functionality that will be available via the NHS App and Personal Health Records.

You are advised that you start limiting the enrolment of any patients or their proxies on the MyCMC patient portal as this will be withdrawn on the 31st of March.

3. Restricted Records

The CMC system includes restricted record functionality. This enables clinicians creating and updating care plans, to restrict access to individual patient's plans to other identified CMC system users; for example for VIP and staff, who may also be patients. The number of restricted records currently on the CMC system is low, approximately 35. To find out the contact details of restricted records without viewing these records, users can contact a CMC system user with access to the plan or follow a "break the glass" process to gain read only access to the plan.

The principles of information sharing set out by the OneLondon Shared Care Records programme mean that commissioners have not specified this functionality for the new application. Therefore, restricted records will not be migrated to the new Urgent Care Plan.

We would like to offer patients who currently have Restricted CMC plans the option for their care plans to be migrated to the new solution. The CMC service has identified all such plans and has asked CMC system users with access to these plans to determine if these patients would like their care plans to be un-restricted and migrated to the new system. Records of patients who still have a restriction after 31st March 2022 will not be migrated to the new system. With the permission of a clinician supporting the affected patient, CMC are willing to contact patients with restricted records on their behalf.

In order to ensure that your patients with restricted records have the option for their care plans to be migrated to the new solution, you need to contact them and, if agreed, un-restrict their care plans by 31st March 2022. Restricted records that are not un-restricted before this date will not be migrated to the new solution.

For details on how to un-restrict restricted care plans, please see Appendix C.

You are advised that with immediate effect you should not record any further CMC care plans as restricted records.

Installation of desktop client for EMIS and SystmOne Users

ICS Primary Care IT teams are required to install a desktop client, Valida, onto all desktops where EMIS and SystmOne are in use. This will enable:

- EMIS and SystmOne users to open and edit care plans within EMIS/SystmOne.
- Data from these systems to pre-populate in the care plans, when a new care plan is created.

The implementation plan will depend on your ICS IT arrangements and processes. Primary Care IT teams have been notified and instructions for how to install the client have been shared.
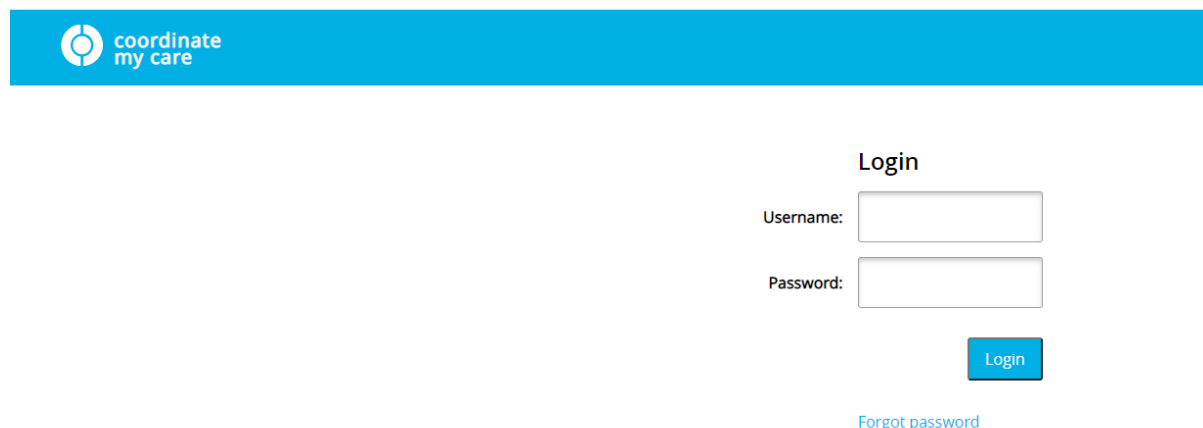
Please ensure that your Primary Care IT teams are aware of the requirement for this to take place. GP practice that do not have the client installed from go-live will need to access care plans via London Care Record which can be accessed via Health Information Exchanges (HIE) across London, or via a web portal.

Vision Users

It is anticipated that users of Vision will have single-sign on access by April 2023. Until this is available, care plans will be accessible via the London Care Record which can be accessed via Health Information Exchanges (HIE) across London, or via a web portal.

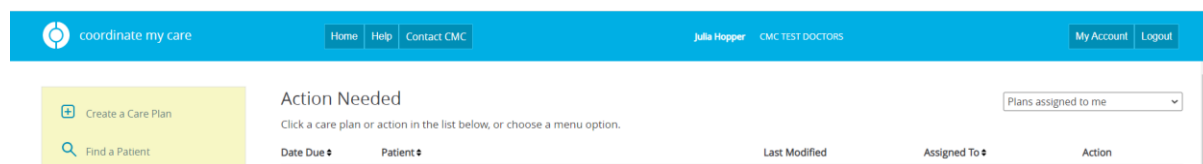**Appendix A: How to identify, finalise and approve draft care plans**

To identify the outstanding draft care plans assigned to you and your organisation to finalise and approve them, you need to login to the CMC system via the URL link:
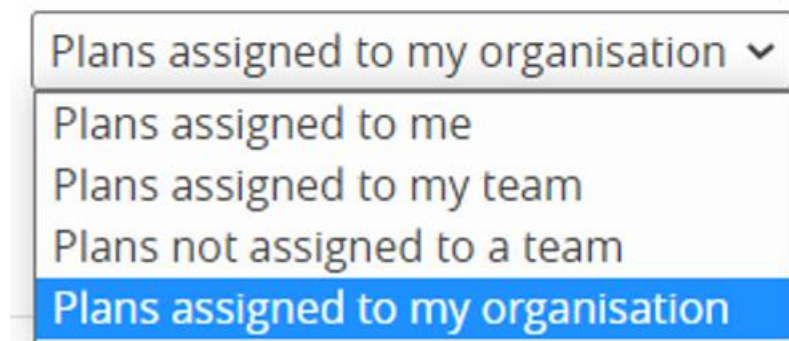

If you usually access the CMC system via an in-context link from your usual operational system (e.g. GP system, acute electronic patient record) and have therefore forgotten your CMC system username and password, please contact the CMC help desk who will be able to provide this information:
coordinatemycare@nhs.net
020 7811 8513 .

When you login the system will open on your Home page, the Action Needed list, displaying a default list of patients' care plans with outstanding tasks assigned to you:

To identify the draft care plans assigned to you and your organisation to enable you to finalise and approve them so they will be migrated to the Urgent Care Plan, you can filter the list of outstanding tasks by all care plans assigned to you (the default) or your organisation:

And filter the outstanding tasks by task type by clicking on draft plans and plans needing approval in the Summary box:

Summary

33	total plans
27	draft plans
6	plans needing review
0	plans needing approval
0	patient care plan requests
0	patient change requests

If you identify a draft care plan that is no longer required, you can discard the draft by clicking the Discard Draft button in the care plan banner:

State of Care Plan: **Draft, Editing**
Last saved on: **25 Feb 2021 at 09:15**

[APPROVE] [RECORD DEATH] [DISCARD DRAFT]

Recall that any care plans in draft status after 31st March 2022 will not be migrated to the Urgent Care Plan.

Appendix B: How to identify and action outstanding MyCMC patient requests
To identify the outstanding MyCMC patient requests for care plans and changes to their care plans assigned to you and your organisation and to action them, you also need to login to the CMC system via the URL link, and work on your Home page, the Action Needed list, displaying a list of patients' care plans with outstanding tasks assigned to you, as described above.

To identify the MyCMC patient requests assigned to you and your organisation to enable you to action them, you can filter the list of outstanding tasks by all care plans assigned to you (the default) or your organisation, and filter the outstanding tasks by task type by clicking on patient care plan requests and patient change requests in the Summary box.

Recall that any outstanding MyCMC patient requests after 31st March 2022 will not be migrated to the Urgent Care Plan.

Appendix C: How to un-restrict restricted records
If CMC contacts you to inform you one or more of your patients has a restricted record, you will need to contact the patient to discuss this. As stated previously restricted records will not

be migrated to the Urgent Care Plan. If your patient wishes to have their care plan migrated to the new solution, you will need to un-restrict their care plan.

To un-restrict a restricted record, simply access the patient's care plan in edit / update mode, go to the Patient Consent section of the care plan and scroll down to where you will see the Restricted Record box. Simply click the Change to Unrestricted button and approve the care plan.

Restricted Record	Restricting care plan access is rarely required and should be used with caution. Please read more before using this feature.
	Record is restricted Change to Unrestricted

If you need support with any of the above actions, please contact the CMC help desk: coordinatemycare@nhs.net

020 7811 8513