



Digital

From Read to SNOMED CT

SNOMED CT in primary care

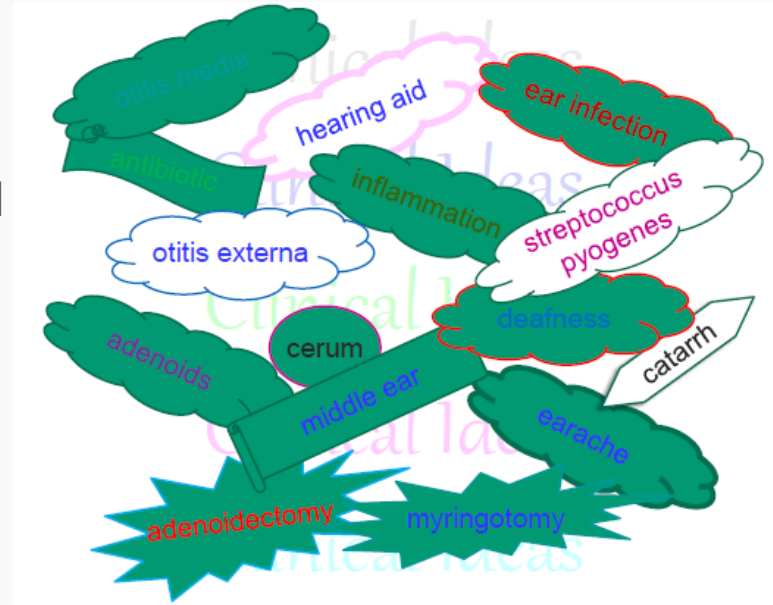


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What is SNOMED CT?

- A national common vocabulary of 'Clinical phrases' e.g. headache, asthma for electronic systems
- Has content for all clinical professions and specialties to enable interoperability e.g. primary and secondary care
- dm+d is a separate product (dictionary of medicines and devices) but also uses SNOMED CT
- Will replace the current Read codes.



Are they very different ?

Onset	Problem / Detail
Current Problems	
29-Aug-2012	Osteoporosis
02-Jul-2012	Referral for further care
29-Oct-2010	Ischaemic optic neuropathy
2008	Myeloproliferative disorder
28-Apr-1995	Backache NOS
Past Problems	
26-Sep-2014	Postoperative wound infection, unspecified
29-Jul-2014	Total prosthetic replacement of hip joint NOS
11-Jun-2014	Hip pain
07-Feb-2013	Diagnostic colonoscopy
31-May-2012	[D] Pelvic pain
31-May-2012	Hip pain
26-Aug-2011	Myeloproliferative disorder
14-Jun-2011	Posterior vitreous detachment
22-Mar-2010	raised bp (without diagnosis of hypertension)
06-Jan-2010	Other retinal disorders
13-Nov-2009	Essential thrombocytosis
06-Nov-2008	Essential thrombocytosis

The screenshot shows a web application titled "Inpatient Summary". It features several sections for medical history:

- Allergies (1):** Shows "No Known Allergies".
- Diagnoses/Current Problem (1):** Shows "Chronic myeloproliferative disease (207443019)".
- Problems (5):** Lists "AION - anterior ischaemic optic neuropathy (2161359010)", "Cholesterol level - finding (489233011)", "Chronic myeloproliferative disease (207443019)", "Non-smoker (14866014)", and "OA - Osteoarthritis of hip (359418010)".
- Procedures and Procedure History (2):** Lists "Colonoscopy" on 07/02/2013 and "Specimen from bone marrow obtained by biopsy" on 21/11/2008.
- Past Medical History (2):** (Content not fully visible)
- Family History (0):** (Content not fully visible)

Why replace Read?

- Business:
 - Currently we have three clinical vocabularies for EPRs, two in primary care – we need ONE !
 - Content for all healthcare, all specialties
 - Potential to save time and money as electronic data exchange increases
- Technical:
 - Today's technology
 - Addresses shortfalls in Read
- **Improve patient care!**
 - One will enable electronic data sharing and data exchange
 - International: shared effort and supports activity such as rare diseases and genomics
 - Will enable improved patient care through improved data analysis

Read v2 was retired on 1st April 2016
CTV3 to be retired on 1st April 2018

No more Read codes to be created

SNOMED CT is a [national standard](#) under the Health and Social Care Act.

The standard has required implementation dates for **providers of healthcare**:

- Systems used by **GP** service providers must adopt SNOMED CT as the clinical terminology within the system before the **1 April 2018**. SNOMED CT must be utilised in place of the Read codes before 1 April 2018.
- **Secondary Care, Acute Care, Mental Health, Community systems, Dentistry** and other systems used in the direct management of care of an individual must use SNOMED CT as the clinical terminology before **1 April 2020**.
- **Social Care is in scope of the standard** but there are currently no required implementation dates. This is expected in a future update to the standard.

How: transition to SNOMED CT

- Read coded Data in systems now has an associated SNOMED CT code
- When systems switch to SNOMED CT, the system will also 'add' an equivalent Read code where it can (a given subset of SNOMED CT)
- Where dual coded, existing searches, reports, templates, protocols will continue to work – until content only in SNOMED CT is required

Historical data has SNOMED CT
and Read codes

Dual coding continues – planned till
April 2020

Supplier Solutions Development and
Testing

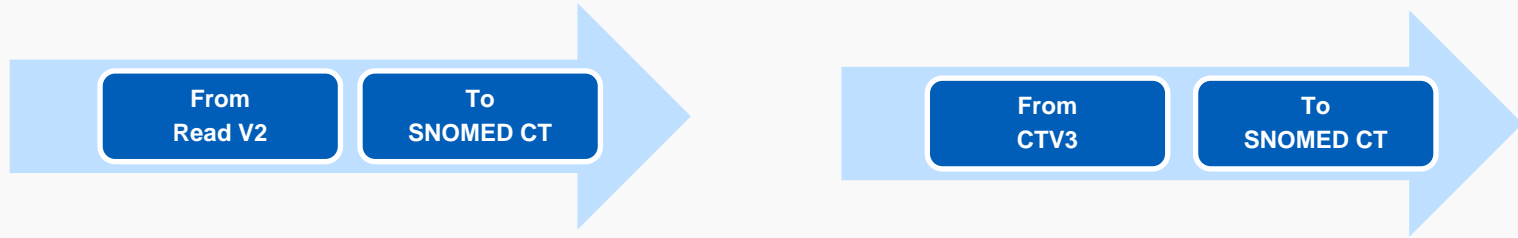
April 2018 onwards – systems
utilise SNOMED CT

Time Lines

- SNOMED CT Transition live from April 2018
- MiQuest supported under GPSoc framework until Dec 2018
- Dual coding of historical and live data until April 2020

National Maps

- National Maps exist from Read to SNOMED CT. Maps are designed to be used in one direction **only**; available from TRUD in [NHS Data Migration pack](#)



Browsers & Mapping Look Ups

Available



How it will affect Users

Data entry - adding data similar, will select SNOMED CT terms.

Some terms previously used may no longer be available; hierarchy will change slightly.

- Data Quality Guidance available from NHS Digital (Delen)

Searches – when new terms used, searches will need updating

Need understanding of SNOMED hierarchies and insight into how historical data is mapped.

- Designing Searches Guidance available from NHS Digital (Delen).

Data Analysis - in-house data warehouses will be impacted.

The SNOMED CT tables need to be loaded and analysts need to understand how their SQL searches will need to change.

- Technical Guidance available from NHS Digital (Delen).

Role of NHS Digital - SNOMED CT



NHS Digital SNOMED CT in primary care programme - established to support & facilitate the implementation of SNOMED CT in primary care



Highlight the benefits that can be achieved through SNOMED CT, which provides a rich and sophisticated clinical terminology nomenclature



Working closely with GPSoC Suppliers (EMIS, Vision, Microtest, TPP) & Lot 1 subsidiaries – implement SNOMED CT safely & efficiently, assuring products & providing implementation support /guidance



Support CCGs, as local commissioners of GP IT services - ensuring relevant / timely advice & guidance

Role of CCGs



Ensure general practices are fully sighted of transition to SNOMED CT - signpost support available



GP IT Operating Model 'core and mandated' requirement - comprehensive data quality advice/guidance service is available to general practice – review in light of SNOMED CT requirements



Ensure GP IT delivery partners are fully prepared, training materials updated and support staff fully prepared



Opportunity for housekeeping / review of local reports, templates



Review any local commissioned reporting/data analysis services – ensuring that data warehouse, extraction and analysis tools can accommodate SNOMED CT



If CCGs have not yet provided NHS Digital with a Nominated Point of Contact for SNOMED CT related matters, please email snomedprimarycare@nhs.net



Resources

Key Publications - SNOMED CT Implementation in Primary Care

Below are a list of publications to support different facets of the transition from Read to SNOMED CT.

Note: Some of these are links to documents hosted on external sites and whilst we make every effort to ensure such links work, please [let us know](#) if you find a broken link.

PLANS & ROADMAPS

FACT SHEETS

DATA QUALITY
GUIDANCE

CCG & GP PRACTICE
INFORMATION

SUPPLIER
REQUIREMENTS &
TECHNICAL
INFORMATION

CLINICAL GUIDANCE
INCORPORATING
SNOMED CT

Plans & Roadmaps

- ▶ [Principal Clinical Supplier Implementation Roadmap](#)
- ▶ [Microtest Evolution Transition to SNOMED CT - Implementation Approach v1.0](#)
- ▶ [EMIS Web Transition to SNOMED CT - Implementation Approach v1.0](#)

Communications

- Bulletins: (NHSE and NHSD) – CCG, GP
- JGPITC letter to all practices and LMCs
- Webinars: Intro, Exploring SNOMED, Designing searches, Data Quality, QOF in SNOMED - PLUS recordings and slides
- Presentations at NUG, conferences, regional events
- Resources: data quality, data warehouse changes, searches
- Forums: CCGs, Train the trainer
- Workshops: CCGs, CSUs, GP IT Service providers, Trainers
- Referenced in CCG questionnaire and Digital primary care maturity assurance tool
- Monthly Snap updates to named CCG contact (named contact for every CCG)

Illustration of approach: QOF

- QOF for 2017/18 will be run using Read codes
- QOF for 2018/19 will be in SNOMED CT only
- The business rules team have produced a baseline in SNOMED CT using current QOF
- This is being used for supplier testing ahead of 18/19

Plan ahead

- What should NHS Health Checks Leads be planning now:
 - **Gaining awareness**
 - Listen to webinar sessions
 - Gain some familiarity with SNOMED CT
 - **Review / identify how NHS Health Checks queries provided**
 - Commercial software, e.g. Apollo
 - GP Clinical System Reporting Tools
 - CSU provided queries – do they use MiQuest?
 - Local General Practice – do they use MiQuest?
 - Local Authority - do they use MiQuest?
 - **Check current data quality**
 - Read Data Quality guidance, does practice of code usage need to change

Plan ahead

- **Understand the timelines**
 - SNOMED CT impacting on NHS Health Check data items
 - How will you monitor when new SNOMED CT codes, without Read equivalent introduced?
 - MiQuest 'end of life'
- **Confirm with your provider for NHS Health Checks queries / reports**
 - Do they have plans to migrate from READ /CTV3 to SNOMED CT?
 - Do they use MiQuest as a query language and do they have plans to replace?
 - What are their timelines for the above
- **Understand what your CCG's are doing to transition to SNOMED CT**
 - How does NHS Health Check fit into this plan?
- **Understand what your options are for replacing current process if required**

Any Questions?

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[Delen Web Pages](#)

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