



ppm+ Release Contents PPM+ 20.1:

Date Expected Live: 29/01/2020

Contents: This is a major release for PPM+ across a number of areas:

Included in the 20.1 release of PPM+ are the following:

REQ-927 Allowing export of PPM+ data to Governance and Audit Service

In order for the EHR to meet Coroner and IG requirements there needs to be a means by which these services can obtain a "print" function of activity within the EHR. This could be generating PDFs of activity and sending it as a secondary task to IG. It would initially cover the following elements:

- * eForms in the new framework
- * Documents held by PPM+ within it's doc store (eForms in the old framework)
- * Data from PPMv1

REQ-750 Identifying and raising tasks of Radiology suspicious findings to ensure patients aren't missed

Culmination of several pieces of Radiology feed work that uplift the radiology functionality within PPM+:

- * Potential to produce a FHIR resource for verified Radiology reports at LTHT to surface through LHCRE
- * Reduction in replication between PPMv1 and PPM+
- * Playing of booked, cancelled and delivered radiology activity through PPM+
- * Presentation of a radiology eForm within PPM+ that focusses clinical attention
- * Production of an initial task that proves ability to trigger a review task for suspicious findings by another team. (THIS REQUIREMENT)

This is in part an element of decommissioning PPMv1

REQ-932 Improving the functionality of the LHCRE Tab and depth of the shared record (Phase 2)

Work related to moving the LHCRE and potentially aligned LYPFT Care Director work forward

It is the intention to progress the presentation and approach to handling FHIR resources from various sources in a singular and consistent manner. This includes:

- * LYPFT (REQ-810)
- * LHCRE System of Systems (REQ-932)
- * GP Connect

REQ-979 PPM+ record locator (see dev ops)

NOTE THIS EPIC IS NOT UP TO DATE. PLEASE SEE DEVOPS ON AZURE

This is part one of alfresco work to add the internal record locator

https://dev.azure.com/ltht-ehr/PPM/_workitems/edit/238

Alfresco

- POC-2: Scanning with OCR for storing and searching. Using Chemocare charts as a test, these will be forward scanned using the ECM 'out of the box' OCR tool to automatically detect the document type and key information from the document
- POC-3: PPM+ Integration. Using the above POC, the scanned charts will be automatically integrated and viewable on the patient's event timeline within PPM+/LCR.

The POC from a PPM view will be to establish that PPM+ can launch a document held in Alfresco using the Alfresco document viewer

It is anticipated that this will be the feature that drives out delivery of an improvement in the optimisation and functionality of the SPV Event List.

Improving the performance

Create an initial RLS for the EHR that aligns to the strategic event store approach to delivering a single query-able resource of activity and resources available to the system.



It should form the basis of replacing the complex views and queries that currently compile the SPV event list

It should allow for future easy decommissioning of PPMv1

Initial work is intended to run alongside Alfresco work

The RLS will eventually hold every patient level eForm/feed that is processed via the *event store* and provide a hook into the LHCRE call for data being the initial source of information regarding available events that can then be used by the LHCRE System of Systems to call for an individual document

REQ-780 *Migrating CNS Consultation to New Framework & adding new team versions

To move all old CNS consultation variants and build new variants into new eforms framework at the same time

REQ-866 Optimising PPM to improve performance and deliver new eForm capability (20.1)

Work undertaken by the DBA to generally optimise and improve PPM performance and processes plus aligning upgrades to the form4health framework product with releases.

Framework enhancements will be fully tested by related products that utilise them. Otherwise the testing of both these elements is thought to be through existing functional and automation testing practices

REQ-952 Delivering PAWS/NEWS2 Feedback (20.1)

undefined

REQ-616 Capturing and tabulating a patient's seizure record

A 'quick win' form identified by the nursing and AHP documentation meeting group.

REQ-911 20.1 Small changes that deliver quickwins for users

Each release has the potential to deliver very small but beneficial changes. Rather than create an EPIC for each individual change, this EPIC allows for multiple small RFCs and their associated stories to be managed through a release cycle.

Stories:

- CP-25127 Seizure Record Aggregation
- CP-19021 (Must do) Seizure Record eForm
- CP-25825 (Must Do) Radiology findings custom list - Story 8
- CP-21575 (Must Do) Closing a Radiology Task (eForm) - Story 7.1
- CP-21573 (Must Do) Radiology Alerts (Task) - Story 7
- CP-22489 CNS Consultation
- CP-27036 (Should Do) Changing the background colour for the 'High Priority Alerts'
- CP-26418 (Must Do) Naming convention of exported documents
- CP-25682 (Must Do) Copying documents from the doc store
- CP-25681 (Must Do) generating PDFs from EHR data entered via the new eForms framework
- CP-25680 (Must Do) Setting up a pre defined IG location to send exports to
- CP-25679 (Must Do) Allowing a member of IG to initiate export of the EHR record
- CP-26498 (Should do) LHCRE - Ask the user for the reason for viewing the tab
- CP-26984 Enhance XFormsPPM.PropagateLthFormPermissions so it can be called from the XForms Admin Panel

Bug Fixes:

- CP-27120 Seizure record eform-ability to edit form
- CP-27114 Seizure Record eForm - Form submission error if time not edited
- CP-27104 Seizure Record eForm - Hover text incorrect
- CP-27102 Seizure Record eForm - Snippet incorrect
- CP-27096 Seizure Record eForm - Form Created in Summary list as well as Aggregated

View

- CP-26991 Seizure Record eForm - Time not submitting if attempted within the same minute
- CP-27118 Radiology Report - The data flow from CRIS to UAT1 is not present in the event list
- CP-27142 Radiology Task: Task should be removed when the existing report with code #LungCa is updated with the code #LungCa removed
- CP-27132 Radiology Report - one report flow from CRIS to UAT1 triggers two task
- CP-27129 Custom List : Radiology - Suspicious Findings (Radiology Investigations) filtering by consultant does not produce reports related to those consultant
- CP-27119 Radiology Task: Task is not triggered - when report with code #LungCa is flow from CRIS to PPM+ (UAT1)
- CP-27083 Resolving Suspicious Finding Task e-form filled in with 'No' for appropriate steps followed should not be remove/conclude task
- CP-27175 Custom List : Suspicious Findings (Radiology Investigations) - Unable to Sort Investigation Date in Descending order
- CP-27081 Closing a Radiology Task: Resolving Suspicious Finding Task e-form - Further comments in the form should be Multi-Line text
- CP-27156 cns consultation-patient current ward missing from inpatient pain team variant
- CP-27140 CNS consultation-extra option in teams list
- CP-27134 CNS consultation-draft function showing
- CP-26039 Forms 4 Health - 'CNS Consultation - Spinal' variant - problem with multi-select
- CP-27155 cns consultation-extra fields in teams involved section (parkinsons variant)
- CP-27154 cns consultation-text change to non motor symptoms section (parkinsons variant)
- CP-26063 Forms 4 Health - 'CNS Consultation - Oncology' - Other Referral Comments box anomaly
- CP-27163 cns consultation-spelling mistake in immunology variant
- CP-27160 cns consultation spinal team variant- text change in proposed treatment list
- CP-26026 (Must Do) [LIVE] Handover - Observation column not appearing



CP-26499 (Should do) LHCRE - Cache record availability as an LR

Other:

Implementation Plans:

Item	Dept	Start Use	No Users