

NUGGETS

National User Group Glossary of EMIS Terms

This is NOT an exhaustive list. It is a starting point. Corrections can be made. New items can be added.

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	EMIS Term or Phrase	Definition (max 300 characters)
1	Template (clinical)	A way of adding standard sets of coded information quickly into the patient's Electronic record. Clinical Templates can be exported to and imported from other EMIS Web practices as an .xml file
2	Template (document)	A specialised document embedded in EMIS Web which is able to import data from the patient's medical record into a MS word document. Document Templates can be exported to and imported from other EMIS Web practices as an .ewdt file
3	Search	A means of interrogating the EMIS Web patient database to identify a group of patients with certain attributes (such as 'hypertension', aged between X and Y, on medication A, B or C). Searches can be exported to or imported from other EMIS Web sites as an .xml file
4	Report	A means of revealing information about groups of patients generated in a Search. For example a Report might be built to be able to show the name, age, gender and latest BP readings of all those who are in a search identifying those with hypertension. Reports can be exported to or imported from other EMIS site as an .xml file
5	AutoReport	A 'smart' report which can be automatically generated by EMIS based on the features within a search. Like Reports, AutoReports can be exported to or imported from other EMIS site as an .xml file
6	Protocol	A system by which the computer automatically undertakes a set sequence of tasks. This may be simple, such as launching a specified document, or complex, using the content of the patient record to determine the sequence and outputs. Basic Protocols Course on www.emisnug.org.uk/basic-protocols
7	Concept	A concept is a tool for interrogating the patient's electronic record. These are written to be used in protocols or templates to determine how the system will respond based on the content of the record. An example of a concept would be a check which runs when a patient record is loaded, which will check if the patient is female, is in appropriate age range but has not had a smear check in the necessary date range. A Protocol could then run in the background which fires up an alert if the patient fulfils the concept criteria. Concepts can be exported to or imported from other EMIS site as an .xml file

8	Library	Library items are items that are either saved within the practice for re-use or published for others to use. Within templates these may be a page, section or an individual elements (eg smoking). Library items can be authored and saved by the practice, others are authored centrally by EMIS. There are also library items for concepts and indeed protocols. Concept library items can be really helpful as there are a wide range of pre-written concepts looking at a whole host of areas - try searching for concepts first before creating your own. Protocol library items are the nationally provided protocols by EMIS web; these display many of the alert warnings you will be used to seeing.
9	Referral Target	When creating a referral out of EMIS, the Referral Target is a mandatory field which needs completing. This is a centrally-defined list of potential referral destinations which can be selected in the search box, or browsed through a hierarchy tree (<i>TIP: this list is managed by EMIS based on requests made by practices over many years. It can be cluttered and difficult to find correct referral destination. Drag down to the bottom of the hierarchy tree, then select your country, county, and navigate to the organization you need. If it is not there, you may wish to contact EMIS support in order to ensure they refresh their list</i>)
10	Schedule	A number of functions can be run according to a schedule. This means that the system will run automatically without user intervention. You may for example have a set of searches that you want run on the first Monday of every month. This is a schedule. Scheduling a Search to run regularly requires entering the Search's properties and using the Schedule tab
11	Authorise (medication)	Authorising a medication (or re-authorising one already on repeat list) means the clinician is taking responsibility to ensure the medication listed is correct for the patient - and they are giving authority for that medication to be issued to the patient.
12	RBAC (Role Based Access Control)	Role Based Access Control is a security system which restricts the access of a user such that they can only see or use parts of the system or patient record appropriate to their role within the practice.
13	Patch	EMIS web receives software updates via "patches" This means that instead of downloading and installing a whole new copy of the programme the computer code is updated (or patched) to remove the old code and insert the new. Patches are not applied to the whole country in one go - practices are in groups called 'patch domains' and EMIS will roll out a patch to one patch domain at a time.
14	Workflow	Workflow in EMIS is a module with a number of sub-modules. It currently consists of 'Tasks', 'Lab Reports' (which includes radiology), 'Registration', 'Medication Management', 'GP2GP', 'Document Management', 'Referral Management', 'Test Requests', 'SCR', 'Report Management'. Not all of these sub-modules will be visible to all users depending on their RBAC set up. (There are also three other sub-modules, 'New Birth Notifications', 'Child Health Data Import' and 'Care Plans' which are not used in core GP EMIS system - but might be visible in

		other versions of EMIS Web (such as EMIS Web 'Child and Community' product).
15	GP2GP	The national programme for the electronic transfer of records when a patient changes practice.
16	EPS	Electronic Prescription Service. A national system enabling prescribers (GPs and other authorised prescribers) to send prescriptions electronically to a dispenser (such as a Pharmacy) of the patient's choice, removing the need to print a paper prescription.
17	SCR (Summary Care Record)	A copy of key information from the GP record uploaded automatically to the NHS Data Spine depending on patient implied consent. It provides authorised healthcare staff with secure access to a defined set of coded information (medication issued in last 6 months, allergies). Basic SCR is the default setting. With patient permission, a surgery can increase their SCR level to 'SCR-AI [Summary Care Record with Additional information] – which will also include other coded data such as investigations, problem titles. SCR-AI can be configured for individual's own record to allow or disallow different data elements to be visible via SCR
18	Sharing	The disclosure of data from one organisation to a third party organisation or organisations, or the making data available to different parts of one organisation.
19	Online Access (eg Patient Access , or Patient Facing Services PFS)	A service allowing patients online access to their records, such as (depending on practice choice): appointments, repeat medication, results, consultations, significant history, allergies, updating contact details, messaging
20	Proxy Access	Proxy Access is the facility whereby – if a person wishes – they can allow a third party (eg relative, spouse, carer) to access the person's Health Record. Proxy set up should require appropriate checks and validation to ensure th proxy is being appointed by the person without coercion. If the person granting proxy access does not have capacity there will need to be a legal basis to permit proxy to be set up (eg a MCA Best Interest Decision)
21	SMS	Short Message Service (SMS) is a text messaging service component of phone, Web, or mobile communication systems. It uses standardised communication protocols to allow fixed line or mobile phone devices to exchange short text messages. EMIS can send SMS directly from within certain parts of the system. Other third party applications can interface into DEMIS to allow SMS's to be sent and recorded back into EMIS (eg AccuRx, Mjog)
22	Slot	A period of time displayed in appointment view which can be configured to show different characteristics such as duration and type, with defined attributes. Slots are collected together to make a Session which can be saved and replicated to make an Appointment Book.
23	Coding	Translating human language such as medical terminology into a systematic classification represented by digits which can be understood by computers thus providing the standardised vocabulary by which clinicians can record patient findings and procedures in health and social care IT systems.

24	Read code	The standard coded structure thesaurus of clinical terms used in the NHS since 1985, to record information in IT systems mainly in primary care settings. There are two versions: version 2 (V2) and version 3 (CTV3 or V3). SNOMED-CT will gradually replace read codes from 2016
25	SNOMED-CT	“Systemised Nomenclature of Medicine: Clinical Terms” a comprehensive scientifically validated system for classifying and coding medical terminology. It is available in more than fifty countries and will become the standard clinical terminology across the whole NHS and social care system. SNOMED CT has been gradually replacing Read coding in EMIS (and other GP IT systems) since April 2019
26	GPSoC	“GP system of Choice”: the contractual framework administered by HSCIC to supply IT systems/services to GP practices and associated organisations in England. It defines which IT systems are funded centrally and sets standards such as for interoperability. GPSoC is being replaced by a different national contractual framework called GP IT Futures from early 2020
27	Ribbon	The ribbon is located at the top of the page in any EMIS web module and allows quick access to any of the functions relating to each module.
28	Quick Access Toolbar	Right at the top of the EMIS Web pane - this handy toolbar resides. By default all users have ‘back’ ‘home’ ‘screen message’ and ‘find patient’ enabled. But shortcuts can be added to this toolbar (use the ‘customise QA Toolbar’ drop-down and add the module to the list. They will be alphabetical after the ‘find patient’ position. This is the same functionality in Microsoft office software)
29	SSO (Single Sign-On)	Single sign on allows a user to access a connected system without having to enter a further user name/password after initial set up e.g. EMIS and Docman.
30	Trigger	Triggers are sets of criteria and/or user types who will trigger off a Protocol in EMIS. For example triggers may be set up so that a reminder to check a person’s pulse rhythm will appear when any clinician enters a code for a BP value in a person over 60 years (in order to screen for atrial fibrillation)
31	Alert	Alerts are seen in a pink box at bottom right corner of the screen. These can convey useful prompts to the user e.g. flu vaccine due. Alerts include those installed by EMIS but can be set up configured locally - more information can be given by ‘hovering’ over the alert, and double clicking can take the user directly to the relevant template. The Alert box can be dragged and placed anywhere on the screen
32	Nomination	Means by which surgery or pharmacist (with patient instruction) can chose to which chemist (and DAC for appliances) their EPS script will be sent electronically. Only one main chemist and one DAC allowable at any one time. The nomination held on the spine so will remain after patient moves GP. Remind your registration team to check this for new incoming patients as an ‘old’ DAC will remain on a patient record via GP2GP – which might mean prescriptions are sent many miles away to their old place or residence

33	DAC (Dispensing Appliance Contractor)	This is a supplier of appliances, such as ostomy products and catheters.
34	Patch Domain	EMIS Web runs on several virtual servers, known as patch domains. Each practice's software runs on only one patch domain. Several practices will share a patch domain. All practices within a patch domain will be on the same version of the EMIS Web software.
35	Rules (in Searches)	Start building a search by selecting a new rule. A rule is a single clause in a search. A search can comprise of more than one rule: eg Rule1 AND Rule2 AND Rule3, or Rule1 OR Rule2 OR Rule3.
36	Feature (in Searches)	This specifies the type of data being searched, eg a code, medication or patient demographics.
37	Criteria (in Searches)	This specifies the attribute(s) of the feature being searched, eg a group of Read codes entered after a specified date.
38	PDS (Personal Demographic Services)	This is an NHS Digital spine service which holds the demographic record of all NHS patients: NHS number, name, address, phone number, etc.
39	Care Record	This is the section of EMIS Web holding the patient's detailed clinical record.
40	Summary (in Care Record)	This view shows a brief overview of the sections of the care record on a single page. The default sections shown are problems, medication, allergies, diary, recent consultations, health status (latest BP, smoking status, alcohol intake, BMI). There are additional special summary views for Diabetes, Cardiac disease and Child Health. You can also create your own view in config.
41	Consultations (in Care Record)	Each consultation is recorded including information about the clinician (who is logged in), the location of the consultation (eg surgery, home visit, telephone) etc.
42	Medication (in Care Record)	The medication section is used to issue acute and repeat prescriptions. You can select the type and dose of medication from a pre-populated list. You can authorise how many prescriptions can be issued and set a review date. You can also see past drugs which the patient has had but which are no longer authorised. you can see the drug history information for an individual drug which lists all the prescriptions issued. You can also add medications which are hospital prescribed to ensure a complete list of drugs.
43	Problems (in Care Record)	The problems section lists diagnoses, symptoms or other conditions which have been identified as a clinical problem
44	Investigations (in Care Record)	This is where results of investigations including blood tests and imaging reports can be found.
45	Confidentiality Policy	A confidentiality policy can be set per patient, per problem (code) or per consultation. The data can be marked private to clinician only, doctor only or organisation clinician only. When applied to an individual Read coded item, it can apply to this occurrence only, all existing occurrences or all existing and future occurrences. The usefulness of confidentiality policies in EMIS is limited as it is not possible to add to or amend the built in policies.

		<p>It is visually indicated by padlock symbol.</p> <p>If the person printing out a report has permission to view the data item, it will be printed out.</p> <p>Unfortunately this is not currently a solution to marking third-party information.</p> <p>The NUG is working with EMIS to introduce a new category of confidentiality policy - not suitable for patient online access.</p>
71	Patient Services	EMIS's term for online access for patients. Patient Access is one provider of Patient Services - but other third party providers of patient services will be becoming available
72	Transactional Services	a group of online features which patients can use includes ability to book appointments online, order repeat prescription online, update own details such as phone, email, address, send secure message to and receive response from the practice,