Kettering Format Messages in Vision
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Kettering Format Messages in Vision

Introduction

The ‘Kettering’ Discharge XML message was developed towards the end of the 1990’s for use as a Discharge message. It is a fairly simple XML file that has the ability to contain binary data along with ‘header’ information identifying the sender, receiver and patient. Due to the XML format it is not possible to use embedded images in Kettering messages.

The Kettering message is not designed to carry other information flows and as such the possible service event types used to indicate message type are limited to ones normally associated with Discharge letters. However a number of organisations are using it for other data.

[Flag of England], Wales and Northern Ireland - Currently receive a variety of information in Kettering messages eg:

- Discharge reports
- A&E reports
- Out of Hours reports
- Hospital Letters
- Special clinic letters

[Flag of Scotland] - Vision does not currently support Kettering messages in Scotland because, although the message once in GP Communicator (GPC) would work in Scotland, it would require a transport mechanism to deliver the messages and modification to GPC to cater for this, eg an E-Links queue for the Kettering message type.
Configuring Vision to Receive Kettering Messages

Setting up Vision to allow receipt of Kettering messages is simply a matter of configuring an appropriate trading partner in GPC. Refer to on-screen help Adding a New Clinical Address http://www.inpshelp.co.uk/DLM480/GP_Communicator/index.htm#20513 and Kettering Format XML Messages http://www.inpshelp.co.uk/DLM480/GP_Communicator/index.htm#58912 for details.

The following details are required:

- **Sender and Recipient link codes**
- **England and Wales - Trading partner's DTS address**
- **Northern Ireland - Trading partner's e-mail address**
- **Receipt Reports** - Decision as to whether to generate or not.

⚠️ Note - If hospital messages are to be sent using the same system as the laboratory uses for Pathology results, and the same link codes are used, the address will already be present and the trading partner will just need the Receipt reports turned off for Kettering messages if these are not to be used.
Kettering Message Content

Kettering messages are filed into Vision as attachments, therefore the data is not filed into the patient record in a searchable format.

Message Type or Content is identified by the ServiceEventType value within the Kettering Message and is displayed in Mail Manager and then filed into Consultation Manager using the Vision document type corresponding to the ServiceEventType received, eg a ServiceEventType of IP would mean the document was filed into Consultation Manager as a Discharge Summary. In addition to the original list we added AE as a valid value ServiceEventType.

<table>
<thead>
<tr>
<th>Service Event Type from the Kettering Message</th>
<th>Displayed in Mail Manager</th>
<th>Filed into Consultation Manager as:</th>
</tr>
</thead>
<tbody>
<tr>
<td>IP</td>
<td>DTY001 - In Patient Report/Discharge Report</td>
<td>MMT012 – Discharge Summary</td>
</tr>
<tr>
<td>DI</td>
<td>DTY003 - Investigation Report/Test Result</td>
<td>MMT015 - Diagnostic Test Report</td>
</tr>
<tr>
<td>NC</td>
<td>DTY019 - Hospital Report/No Patient Contact</td>
<td>MMT011 – Other Attachment</td>
</tr>
<tr>
<td>RC</td>
<td>DTY019 - Hospital Report/Hospital Report</td>
<td>MMT011 – Other Attachment</td>
</tr>
<tr>
<td>TR</td>
<td>DTY019 - Hospital Report/Tertiary Report</td>
<td>MMT011 – Other Attachment</td>
</tr>
<tr>
<td>UN</td>
<td>DTY005 - Out of Hours Report/Third Party Contact</td>
<td>MMT016 – Out Of Hours Report</td>
</tr>
<tr>
<td>AE</td>
<td>DTY042 - Emergency Department Report</td>
<td>MMT037 Emergency Department Report</td>
</tr>
</tbody>
</table>
Vision uses several data items during message processing and these must contain specific data or be of the expected format to enable the message to be identified and processed correctly:

- `<MsgId>615897-Discharge</MsgId>` Any format is allowed but each must be unique to avoid Duplicate message warnings, therefore ids based on date\time only are not recommended as there is a high risk of messages sent at the same time being marked as duplicates.

- `<MsgIssueDate>200107201522</MsgIssueDate>` Format CCYYDDMM or CCYYDDMMHHMM.

- `<MsgSender>140000123400001</MsgSender>` The suggested value is NACS code or local ID code or DTS name of sender. For a lab this is often a 15 digit code used as the Lab ID for pathology results.

- `<MsgRecipient>140007048300002</MsgRecipient>` The suggested value is the NACS code, local ID or DTS name of sender of the recipient practice. For messages received from a lab system this is often a 15 digit code as the practice ID for the pathology results.

`MsgSender` and `MsgRecipient` values in the message are matched to the `Sender` and `Recipient Link` codes in GPC to identify the sender of the message and allow Receipt reports to be generated and returned. If there is no match then the message is placed in the attention folder, with an unknown sender status, for the practice to manually process.

- `<IdType>Nhs</IdType>` `<IdValue>1234567890</IdValue>` where the NHS number is expected to be 10 numerics

- `<FamilyName>abalunam</FamilyName>` Patient Surname

- `<GivenName>Ghjk</GivenName>` Patients Forename(s)

Patient names are expected to follow the local Registration Links guidelines used by the practice as agreed with the HA. This may mean that any punctuation is either not present in the Vision record or is replaced by a space. This also impacts capitalisation as only the first letter of each name is capitalised for example:

- O’Keefe is entered as Okeefe or O Keefe

- Wilson-Jones is entered as Wilson Jones

Forenames should be entered in full. Matching of forenames is done as text strings and must be identical to produce a positive match. Where NHS numbers are not used, differences in the format of patient names accounts for a large number of matching failures leaving the practice to manually assign the message to the correct patient.

- `<BirthDate>19962501</BirthDate>` Expected format CCYYMMDD

Other formats are not invalid but will not allow a match to the DOB stored in the patients medical record stored in Vision.

Note - As the Kettering specification is no longer active INPS cannot request additional ServiceEventTypes be created.
- GMP Code
- `<AgentId>`
- `<IdType>GP</IdType>`
- `<IdValue>G9405611</IdValue>`
- `</AgentId>`

Messages are assigned to GP’s using their General Medical Practitioner (GMP) code which is in the format Gnnnnnnnn This must match the GMP codes of one of the GP’s set up in Vision to allow messages to be automatically routed to a specific GP. If this is not present, or does not match a GMP code stored in Vision, the message has to be manually allocated to a GP.

- `<ServiceEventType>IP</ServiceEventType>`

The Service Event type must be one of the 2 character codes listed in the ServiceEventType table. It is used to identify the content of the message and dictates how the message is identified within Vision.

**Filing Dates**

Vision users can select to file by:

- Date of the event reported in the message
- Date the message was generated
- Date they received and filed the message (Default).

Although practices normally use the system date at the time of filing, some practices may decide to use the Clinical Event date eg Date of Discharge. This can be configured within Vision, see Kettering Messages (OOH and Discharge Summaries) on-screen help [http://www.inpshelp.co.uk/DLM480/Mail_Manager/index.htm#20099](http://www.inpshelp.co.uk/DLM480/Mail_Manager/index.htm#20099) for details. To enable the practice to file by event date it is essential it is present and identifiable in the Kettering message. The clinic event date is picked up from the RELDATE field with a Code of 82.

**Note** - RELDATE with any other codes will not be used for filing.

- `<RelDate><Date>201301211302</Date>`
- `<RelDateRole>`
- `<Code>82</Code>`
- `</RelDateRole>`
- `</RelDate>`

It is possible within Vision to file by the Message Issue Date, only a couple of the early pilot sited have requested this and we haven’t widely advertised this option. Normally the message issue date would be either the same day or the day before anything filing by filing date so makes little difference.

- `<MsgIssueDate>200107201522</MsgIssueDate>`
Sample Kettering Discharge Message

The items in Bold are used by INPS for:

- Message typing
- Sender/Recipient/Patient matching
- To date to message
- Identify the message type
- Check for duplicate messages
<?xml version="1.0" encoding="ISO-8859-1"?>
<!-- edited with XML Spy v4.1 U (http://www.xmlspy.com) by Mark Taylor (In Practice Systems Ltd) -->
<!DOCTYPE ReportMsg SYSTEM "..\Schemas\ReportMsg03.dtd">
<ReportMsg MsgStatus="Test" MsgUrgency="Normal">
  <MsgId>615897-Discharge</MsgId>
  <MsgIssueDate>200107201522</MsgIssueDate>
  <MsgSender>0080140000123400001</MsgSender>
  <MsgRecipient>Z080140007048300002</MsgRecipient>
  <ServiceRequester>
    <IdValue>1</IdValue>
  </ServiceRequester>
  <ServiceProvider>
    <IdValue>2</IdValue>
  </ServiceProvider>
  <PatientMatchingInfo>
    <PatientId>
      <Id>
        <IdType>Nhs</IdType>
        <IdValue>1234567890</IdValue>
      </Id>
      <Id>
        <IdType>Requester</IdType>
        <IdValue>11720</IdValue>
      </Id>
      <Id>
        <IdType>Provider</IdType>
        <IdValue>20001005</IdValue>
      </Id>
    </PatientId>
    <PersonName_s>
      <PersonNameType>CU</PersonNameType>
      <StructPersonName>
        <FamilyName>abalunam</FamilyName>
        <GivenName>Ghjk</GivenName>
        <Title>Mr</Title>
      </StructPersonName>
    </PersonName_s>
  </PatientMatchingInfo>
</ReportMsg>
<BirthDate>19962501</BirthDate>
<Sex>1</Sex>
<Address_u>
  <UnstructAddress>
    <UnstructAddressLine>77 Allnew Road</UnstructAddressLine>
    <UnstructAddressLine>Leeds</UnstructAddressLine>
    <UnstructAddressLine>Yorkshire</UnstructAddressLine>
  </UnstructAddress>
</Address_u>
</PatientMatchingInfo>
<AgentsDirectory>
  <AgentInContext>
    <IdValue>1</IdValue>
    <AgentId>
      <IdType>GP</IdType>
      <IdValue>G9405611</IdValue>
    </AgentId>
    <AgentRel>
      <AgentRelType>3</AgentRelType>
      <AgentId>
        <IdType>PRA</IdType>
        <IdValue>ABBO140442</IdValue>
      </AgentId>
    </AgentRel>
  </AgentInContext>
  <AgentInContext>
    <IdValue>2</IdValue>
    <AgentId>
      <IdType>Specialist</IdType>
      <IdValue>C2709019</IdValue>
    </AgentId>
    <AgentRel>
      <AgentRelType>3</AgentRelType>
      <AgentId>
        <IdType>Provider</IdType>
        <IdValue>RNQ00</IdValue>
      </AgentId>
    </AgentRel>
  </AgentInContext>
</AgentsDirectory>
<AdministrativeOutcome>
</ReportedEventItem>
</ReportedService>
<PatientAdminInfo>
  <RelAgent>
    <RelAgentRole>
      <Code>PRG</Code>
    </RelAgentRole>
    <IdValue>3</IdValue>
  </RelAgent>
</PatientAdminInfo>
<ClinicalReport>
  <TextItem>
    <Cuid IdScope="Message">2</Cuid>
    <TextMarkupIndicator>
      //IETF//DTD HTML//EN</TextMarkupIndicator>
    <TextBlock><![CDATA[<html>
<head>
<meta name="generator" content="HTML Tidy, see www.w3.org"/>
<link rel="Edit-Time-Data" href="/E6623952-C6BC-45F4-B964-1CFFCE2FA080_files/editdata.mso"/>
<title></title>
</head>
<body>
<div>
<table border="0" cellspacing="0" cellpadding="0" width="655">
<tr>
  <td valign="top">
    Dr T M Penney<br/>
  </td>
</tr>
<tr>
  <td valign="top">
    24 Linden Avenue<br/>
    Kettering<br/>
    Northants<br/>
  </td>
</tr>
</table>
</div>
</body>
</html>]]></TextBlock>
</TextItem>
</ClinicalReport>
<table>
<thead>
<tr>
<th>NN34 5TH</th>
<th>05 May 2001</th>
<th>Dear Dr Penney</th>
</tr>
</thead>
</table>

Admission Date 12/12/2000 - Discharge Date 13/12/2000

27 Station Road, Kettering, Northants, NN3 4RT
I saw this patient as requested and could not find any evidence of an injury. I was therefore able to examine Mr Howarth without sedation.

My conclusion about the cause of his problems are listed below.

<table>
<thead>
<tr>
<th>Primary Diagnosis</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multiple Sclerosis</td>
<td>PKY42</td>
</tr>
</tbody>
</table>

Secondary Diagnosis:

Chronic Bronchitis
Paracetamol 600mgs

Two tablets every eight hours if in pain

60x 1 tabs

Reed
<table>
  <tr>
    <td valign="top">
      Ibuprofen 100mgs<br>
    </td>
    <td valign="top">
      1-2 tablets to be taken morning and evening for 7 days<br>
    </td>
    <td valign="top">
      24x1 tabs<br>
    </td>
    <td valign="top">
      Reed<br>
    </td>
  </tr>
  <tr>
    <td valign="top">
      Beta Interferon 30 mgs<br>
    </td>
    <td valign="top">
      I intramuscular injection to be taken weekly<br>
    </td>
    <td valign="top">
      6x 1 injection<br>
    </td>
    <td valign="top">
      Reed<br>
    </td>
  </tr>
</table>

Yours sincerely<br>

Owen Davison FRCS<br>

Consultant Urologist
]]> </TextBlock>
    </TextItem>
    </ClinicalReport>
</ReportMsg>
Message in Mail Manager

The following is an example discharge message displayed in Mail Manager:

Mail Manager - Incoming Mail - Discharge Report
Message Filed to Patient Record

The following is an example discharge message displayed in Consultation Manager:

Consultation Manager - Discharge Summary attachment
To view an attachment within Consultation Manager:

1. From **Consultation Manager**, select the patient in the usual way.
2. Select **Miscellaneous** from the left hand column.
3. The **Filtered List** tab is displayed in the main part of the screen.
4. Double click on the Attachment required.
5. Click **View**.
6. The attachment is displayed.

![Displayed attachment](attachment_image)
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