

A day in the life of.....the Information Manager at Church Street Practice

The job of information manager is very varied and is quite often reactive to the needs of other members of the practice team. No two days are the same although as in any job there are certain things which are done on a daily basis. Some days seem to be spent entirely in meetings, others can be spent chasing around computers with problems and others can be spent entirely in front of the computer running reports and working on the results that are produced. The best days are when there is a mixed bag of activity. I have had different jobs in the practice, starting in reception and then moving to dispensary and been the information manager for about 6 years.

We have a central file server and 40 other PCs on site. A part of my job is to solve any problems that come up with the system, assist any user when necessary and generally keep things working properly. Any major problems are handled by a phone call to outside contractors. They will either dial in remotely to fix the problem, talk me through fixing it or they will send out an engineer.

8.00	The start of each day is very exciting! Switch on both my computers and while they are running up, go and make a cup of tea. With a large cup of tea in hand, I have twenty minutes to check my e-mails, those sent via the website e-mail address and then checking the front desk online booking service for any messages. I can deal with most of these, but some may need sending on to the relevant GPs for their attention.
8.30	Referral meeting with all doctors who are in today. These meetings are held each morning, apart from a Thursday. The doctors discuss referrals that they want to make to see if there is another way of managing the patient without sending them up to the hospital. They are able to use each other's expertise. Once back in my office I need to record the data on my computer so that at the end of each month we will be able to see how many referrals have been made to the different specialities and how many have been saved.
9.15	Run the PARR data (Patients at Risk of Readmission). This is run once a month and will take most of the day to do. The software gives information on patients who are at a higher risk of re-admission to hospital. The data is used by the case management team to target these patients and to try to prevent them having to be re-admitted.
9.30	We need milk again, and so a quick trip to Sainsbury is in order! We can't have the team going without their coffee break!
10.00	<p>The specialist nurse wants to know how many 'flu jabs have been given so far. We need to keep control on them to ensure that we are reimbursed for the costs by the PCT, and that they are recorded so that we meet all our targets.</p> <p>We also need to extract reports from the database to show who we need to call in for health checks in the learning disability group of patients. Those who have 'Health Plans' have not been coded properly, and so all that needs sorting out before the list can be produced.</p> <p>Check the 'Sophie', a tool for recording all the patient details. It seems to be in its original form as provided by ISOFT, the suppliers of the Clinical system used on the computer. I have not run it before, but I can already see that it is far from user-friendly. I need to discuss it with one of the practice nurses and see if she wants me to build a "Form Sophie". This will involve producing a screen template to show and update all of</p>

	<p>the Sophie fields in one operation.</p> <p>I am also adjusting the template letter to be used for patient recall.</p>
10.45	<p>Change the back-up tapes. These are changed on a daily basis, and the back-up runs overnight. We also have tapes for a full weekly backup, and monthly backups of all the information stored on the data base. They are stored in a fireproof safe, and so if we have data problems they can be used to restore information to a point before the problem occurred.</p>
11.00	<p>I have to load another piece of software onto the computers in reception, ready for the 'flu clinic on Saturday. This will ensure that all jabs given can be entered quickly and correctly onto patients' records.</p> <p>I also need to print out several copies of the 'flu lists to be used to check people into the clinic and record that the vaccine has been given.</p>
11.30	<p>A previous report has thrown up some anomalies in the recording of dates in patients' records. I need to work through the list and correct the entries. I also need to check Contract + QOF lists, and update the information wherever possible. (QOF are the targets that we are set by the Government for recording patient care).</p> <p>I must remind clinicians not to put on a diagnosis without adding the confirmation codes.</p> <p>Trouble-shooting throughout the morning. Helping people with their computer queries.</p>
13.00 - 13.30 Lunch	
13.30 – 15.30	<p>Final management meeting with the specialist nurse practitioner, who is leaving, the practice manager and receptionist team leader. Discuss the handover of some of the nurse practitioner's work and also the information that she has on her computer to decide the best place to save it so that it can still be accessed once she has left. We finish up with a final discussion on the details of the 'flu clinic, and the general practicalities of how it should run.</p> <p>The practice manager volunteers to do some shopping for lunch on Saturday for everyone.</p>
15.30	<p>A GP needs some information for their appraisal. This involves a computer search and then pulling it all together for them. Update the Intranet with some referral information e-mailed through by the practice manager.</p>
16.00	<p>End of the day.</p>