

[REDACTED]
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[REDACTED]

FAO Oliver Longstaff, Area Coroner, West Yorkshire
C/O Sharon Baker
Case Manager, His Majesty's Coroner's Office,
The Coroner's Courts,
Burgage Square,
Wakefield,
WF1 2TS
By Email only: [REDACTED]

[REDACTED]

Dear Mr Longstaff,

We write in response to the Regulation 28 Report dated 18th April 2024 (the "**Report**").

We were sorry to read of the passing of Mr Reid, and we would like to take this opportunity to offer our condolences to his family following their loss.

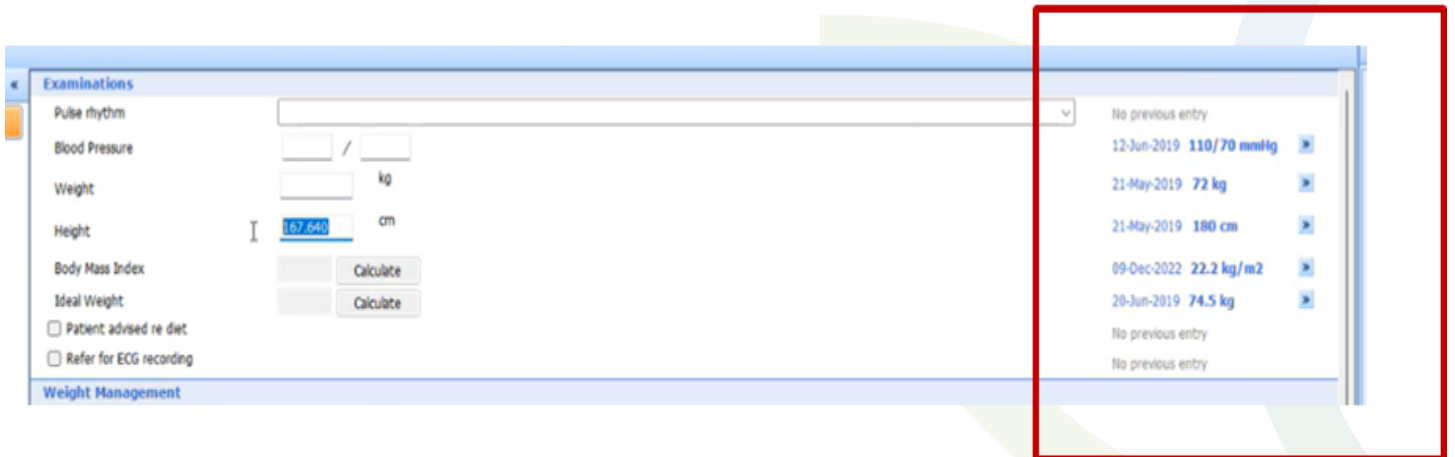
We have undertaken an internal review of EMIS Web (the "**System**"), focussing on the issue raised as a concern in the Report that was relevant to EMIS as a healthcare IT supplier. We understand your view is that more needs to be done by way of specification design (e.g., the embedding of validation rules) in general practice IT systems to allow for challenging and/or correcting data input errors at the point of entry.

This review was undertaken by our internal team, including a Product Manager, Clinical Safety Officer, and Clinical Director.

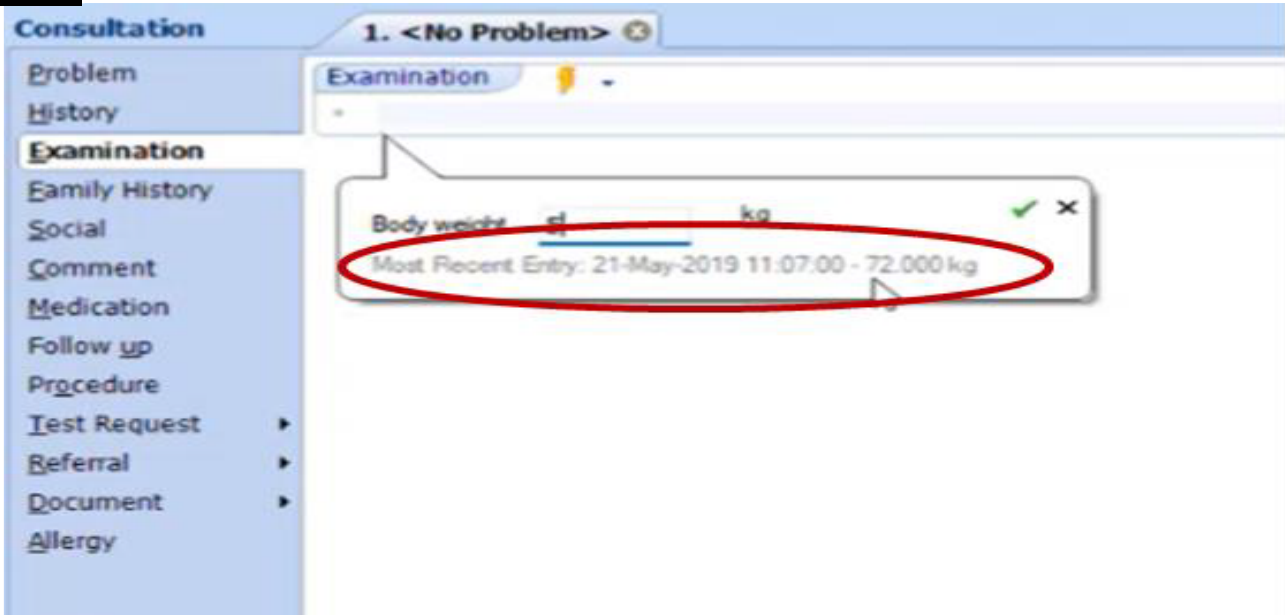
Data Entry

Using the inputting of BMI data as an example, currently a System user can enter information relevant to the capture and calculation of BMI in a number of different ways within the System. Irrespective of which method is used, there are numerous safety principles built in, including:

1. Displaying a previously recorded height, weight or BMI when entering new values:



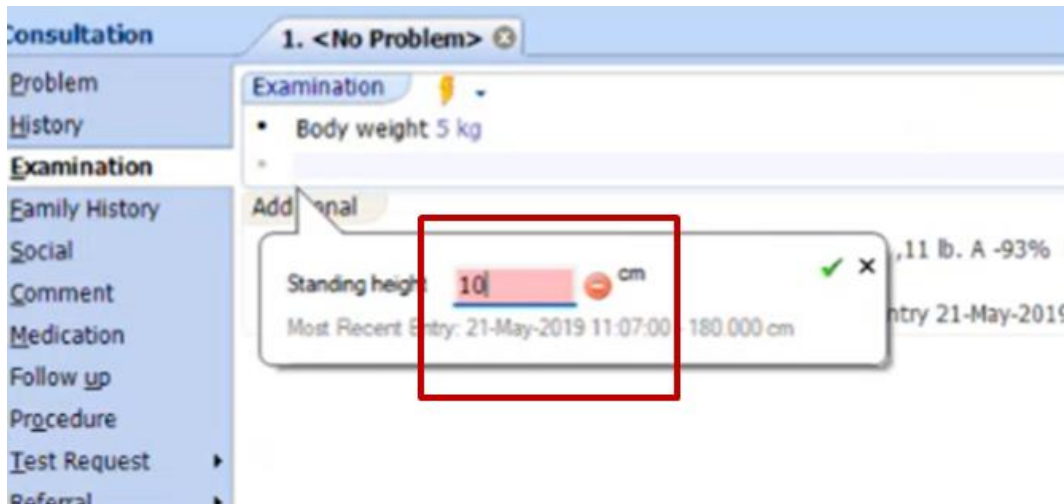
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2. Reference guidance on what a healthy weight should be for the patient:

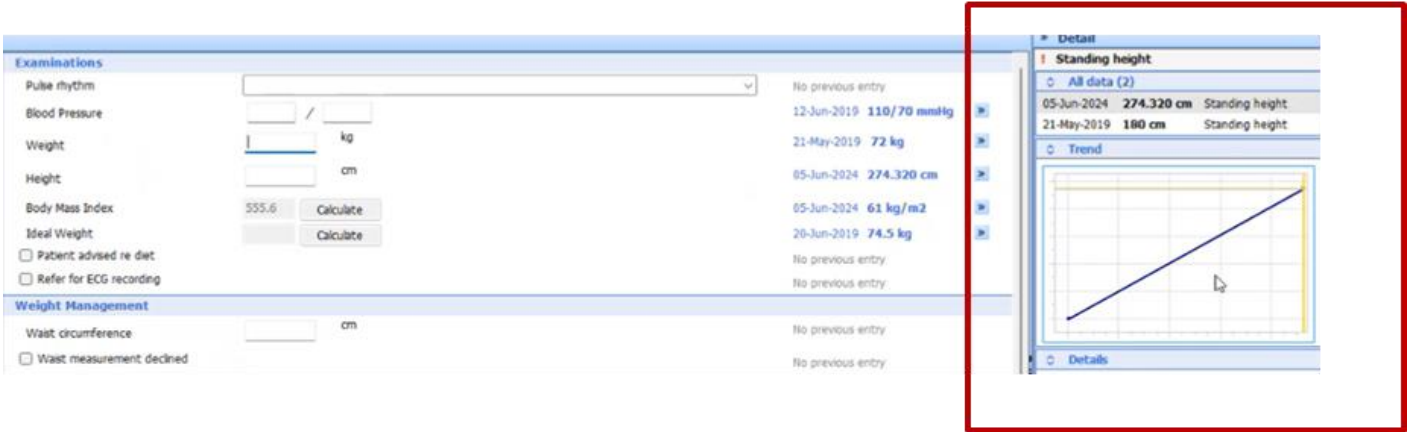


3. An upper and lower expected limit when entering a patient's height, (with a colour-change to alert to values outside of this limit:



[REDACTED]
[REDACTED]
[REDACTED]
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4. A value trend graph, alongside previously entered values:



Although the examples above are focused on BMI, these safety mechanisms also apply where other clinical values are entered into the System.

Conclusion

Data may have presented differently in 2004 as the clinical system in place at the time was called EMIS LV, which was different visually to EMIS Web. EMIS LV worked in accordance with the specifications as set out by the NHS at the time.

As detailed above, the System has inbuilt safety principles and is compliant with NHS specifications. Nevertheless, we will continue to review our solutions to determine whether there are changes to be made which would improve their performance.

In this instance, based on the information provided in the Report, and our subsequent review, we do not believe there are any software developments, beyond the existing functionality in the System, that are required to mitigate the specific risk raised in the Report.

We trust that the details outlined above are helpful. If you have any further queries then please contact our Senior Clinical Director, [REDACTED] (via [REDACTED]), in the first instance.

Kind regards,

[REDACTED]

[REDACTED]
Chief Medical officer, EMIS Group

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]