



# e-Vitalize Patient Care through Standardization

August 11, 2009

Lewis Hooper

Engaged Communities.  
Healthy Communities.

# Objectives of the Day – August 11, 2009

1. **Gain Awareness of the CE LHIN- HIS Consolidation Project**
  - What: What is the Project - Phase I and Phase II?
  - Why: Why do the Consolidation Standards Project?
  - Who: How are you involved and what is in it for you?
  - When / Where: What is the timeframe / and eventual outcome?
2. **View of Meditech 6.0 Modules**
  - Focus on Standards / Clinical Transformation Opportunities
3. **Provide an opportunity for colleagues to network and develop partnerships**

# Topics

- Background
- CE LHIN HIS Consolidation Vision
- Why Standards? – Standards Definition
- Project Sponsors
- Project Governance
- Timeline
- Laboratory Challenge

Engaged Communities.  
Healthy Communities.

# Background

**In February 2009 the Central East Executive Committee (CEEC) agreed to proceed with implementation of Meditech Client/Server 6.0 at all nine Central East Local Health Integrated Network hospitals**

The Meditech Client/Server 6.0 Consolidation, which will serve:

- 9 hospitals with a combined \$1.16 billion budget
- 1.4 million people
- 11% of the province
- 2,164 CE LHIN physicians

is being implemented to:

- Facilitate the provincial goal of creating an electronic health record for all Ontarians
- Better integrate our programs and services
- Create a health information system that can be shared across the nine CE LHIN hospitals
- Reduce and avoid costs associated with information technology
- Improve service delivery

Engaged Communities  
Healthy Communities.

# Central East LHIN e-Health Vision

**Definition:** The use of information and communication technologies to assist in meeting the health care needs of people, healthcare professionals, healthcare providers, and policy makers.

**Vision:** “*Better e-Health → Better Health*”

e-Health in the Central East LHIN will facilitate the electronic exchange of information across the continuum of care in support of the Provincial e-Health vision, the LHIN’s *Integrated Health Service Plan*, and Federal standards in order to:

- Ensure clinical information follows the person, with consent
- Ensure the seamless transfer and referral of people between LHIN partners and others while conforming to Privacy requirements
- Use information technology and information management to support people and families and improve the health and safety of the population in the LHIN and beyond
- Streamline business processes to facilitate efficiency
- Support providers in delivering care

Engaged Communities.  
Healthy Communities.

# Central East LHIN e-Health Implementation Road Map by IHSP Enabler

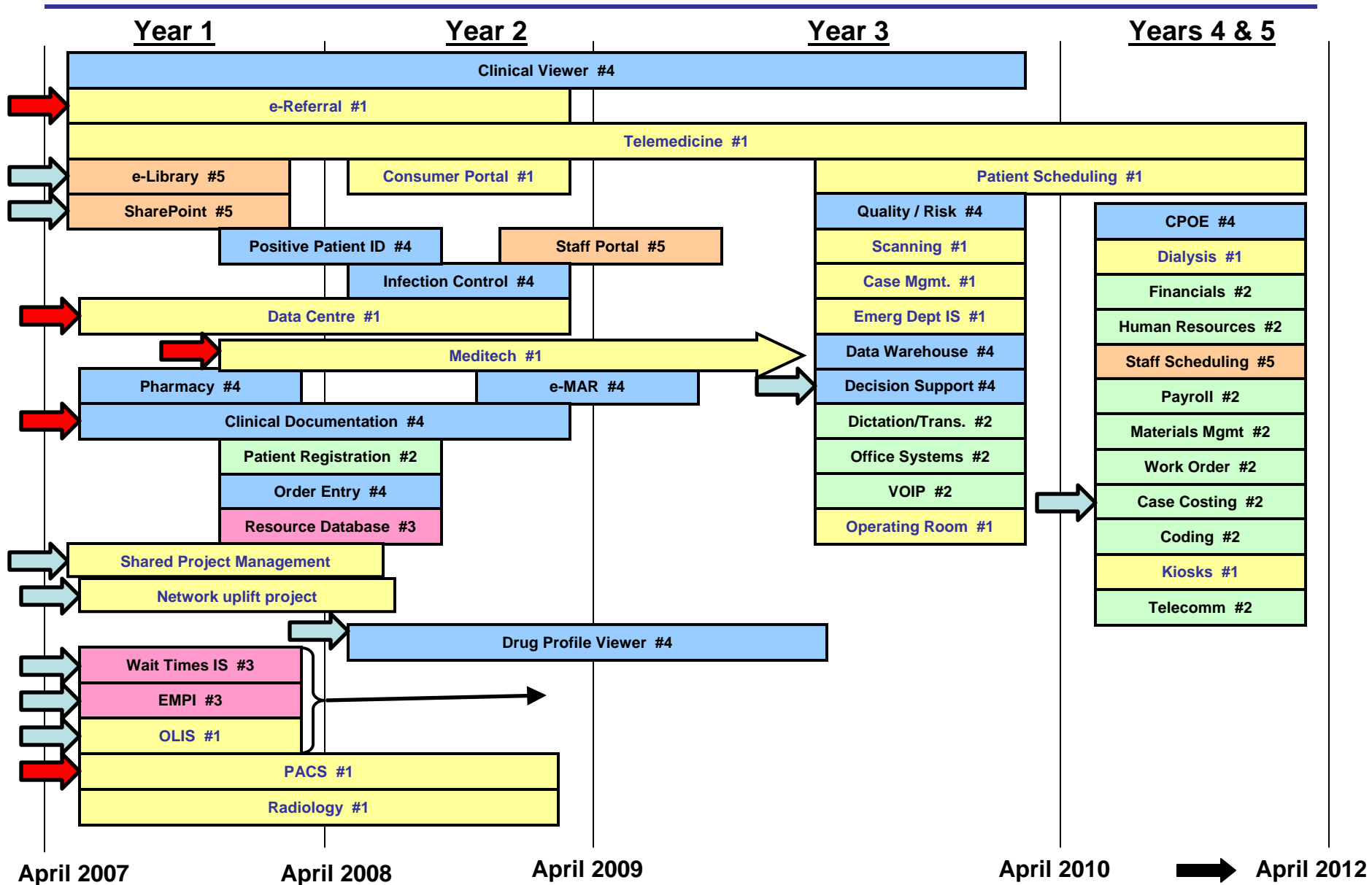
#1 = e-Health

#2 = Shared Non-Clinical Services

#3 = Moving People Through the System

#4 = Safe Environments of Quality Care

#5 = Health and Human Resources



# HIS Consolidation Vision

- Create the next generation of Information System to enable:
  - Shared Electronic Health Records,
  - Shared Workflows,
  - Common Business Processes and
  - Common Approaches to Clinical Transformation
- By integrating:
  - **Within** - Meditech CS V6.0 by Dec 2011
  - **Across** - the Hospitals
  - **Linking** – the Continuum of Care (EHR)

Engaged Communities.  
Healthy Communities.

## Why Standards?

- A shared health information system
- An electronic Health Record for all CE LHIN patients
- Shared governance
- An economically sustainable system
- Shared processes and workflows
- Development of transformation expertise

Engaged Communities.  
Healthy Communities.

# Standards – Definition

- There are two types of standards: data and nomenclature
- Data Standards
  - Are tied to how the module will function
  - Enable information sharing across hospitals
  - Involve creating dictionaries that define how data is input, stored and organized in Meditech
- Nomenclature Standards
  - Are tied to end user workflow and processes
  - Ensures all users are using the same language (i.e., every clinician defines pain using the same scale)

# Principles for the Standardization Project

- Clinical User Driven Project, not IT
- Single set of code, Single Database
- Standards
  - Review standards from NEON and RSHIP, adopt if appropriate
  - Achieve 70%
  - Facilitate common workflow and business processes
  - Decision outcomes are to be implemented by Ontario Shores on the Test environment to be moved to LIVE
  - Support Ontario Shores' implementation
- Team Members
  - Represent their peers and Organization
  - Integrated approach – cross pollination

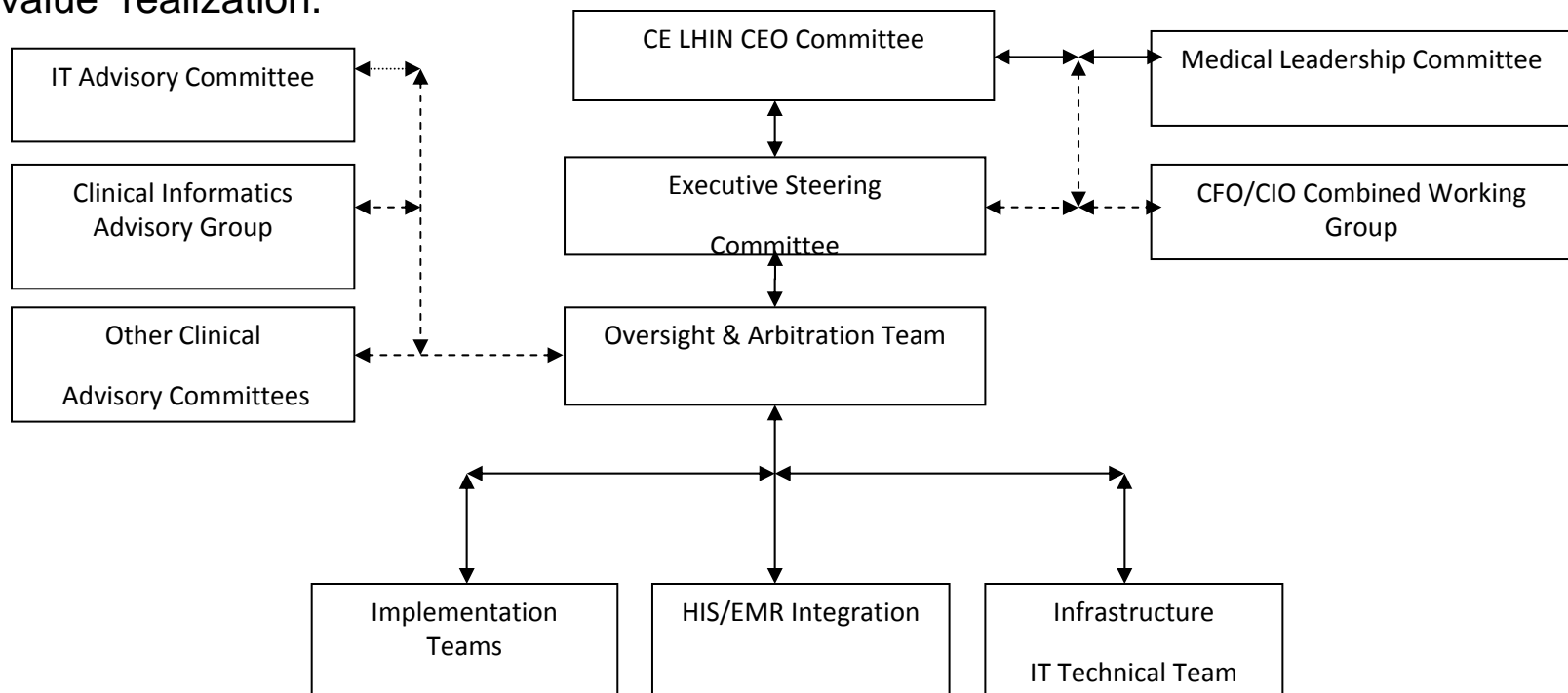
Engaged Communities.  
Healthy Communities.

## Project Sponsors

- The Central East Executive Council (CEEC) oversees the Meditech Client/Server 6.0 Consolidation
- Glenna Raymond – CEO of Ontario Shores is the executive sponsor of the HIS consolidation project
- Lewis Hooper – CE LHIN Regional CIO is the CIO sponsor of the HIS consolidation project

# Project Governance

The Central East Executive Council (CEEC) oversees the HIS Consolidation Project. A governance structure has been created to facilitate expeditious decision making and for value realization.



Engaged Communities.  
Healthy Communities.

# Project Governance

- The Oversight and Arbitration Committee finds solutions when teams have difficulty reaching decisions.
- The HIS/EMR integration Team reviews Standards Teams work to ensure all Meditech modules are well constructed, work is being completed, cross-team communication is occurring, and issues are managed
- A CE LHIN e-Health project management office is coordinating the day-to-day activity associated with the Meditech Client/Server 6.0 Consolidation. This office has five staff
  - Lewis Hooper, Regional Chief Information Officer
  - Marlene Ross, Senior Project Manager, ePMO
  - Karol Eskedjian, Senior Planning Manager, Stakeholder Engagement
  - Mai Nguyen – Project Coordinator
  - Carolyn Kanhai, Administration Support

Engaged Communities.  
Healthy Communities.

# Standards Timeline

- At Ontario Shores, Meditech Client/Server 6.0 will be rolled out in two phases
- Phase 1 - Non-clinical modules (with some clinical overlap)
  - This phase is in progress
- Phase 2 - Clinical modules - This phase begins Fall 2009/Winter 2010
  - ITS - Imaging & Therapeutic Services
  - OM/EMR- Order Management and Enterprise Medical Record
  - PCS/BMV- Patient Care & Patient Safety and Bedside Medication Verification
  - PCM- Physician Care Manager
- Both phases involve the creation of standards



Engaged Communities.  
Healthy Communities.

## Laboratory

- Ontario Shores is implementing a Submerged Lab component
- Challenge is that we do not have Meditech 6.0 LAB sw
- Partnership need to explore a feasible and affordable methodology to accomplish standards for Lab

# Thank you.

Lewis Hooper

CE LHIN Regional Chief Information Officer

Engaged Communities.  
Healthy Communities.