



e-Update

In This Issue

Go Live!

eHealth and Lean - A Good Fit

"Rossified" and Ready

HIS Consolidation

- **MEDITECH Phase I - Standards Support**
- **MEDITECH Phase II - Update**
- **Mental Health Documentation**
- **Joint Procurement**

DCC – RFP Update

Upcoming Events

e-Update is a communication tool developed to keep you aware of eHealth initiatives that involve service providers from across the CE LHIN. You are encouraged to share this e-Update with your boards, staff, physicians, and volunteers. For more information, please visit: <http://www.centraleastlin.on.ca/Page.aspx?id=11808>

If you require additional information about anything you read, please contact Karol Eskedjian keskedjian@tsh.to

GO LIVE!

Health history was made on October 1 when Ontario Shores Centre for Mental Health Sciences was the first Canadian hospital to "Go Live" with MEDITECH 6.0.

The system, which replaces a combination of paper and dated applications, includes the modules: BAR (Billing/Accounts Receivable); CWS (Community Wide Scheduling); MIS Universe (Management Information System/Universe); HIM (Health Information Management); MMAP (Materials Management and Accounts Payable); GL/FA (General Ledger and Fixed Assets); and PHA (Pharmacy).



The Ontario Shores Team

"This implementation was unique," observed Jeanie Wright, Director of Information Technology. "Several applications went "live" all at the same time. Usually you just "Go Live" with one application, not several. The fact that it went so well speaks to the work that went into managing the process and coordinating all the teams. It's a phenomenal achievement for our staff. And the assistance from our CE LHIN partners was incredible."

The implementation journey began almost a year ago, when contracts were signed with the vendor (MEDITECH). What followed was a whirlwind of activity, Kimberly Walker, Manager of Applications and Projects explains. "I co-led the implementation with Donna Foster, Manager of Clinical Informatics. Donna's focus was on the system meeting the clinical needs; I was looking at things from a project management perspective. We formed teams, one for each module and a technical team. The teams managed their implementation areas and in some cases used the opportunity to adopt best practices and streamline processes."

Supporting the Ontario Shores implementation and working in parallel were nine CE LHIN Phase I Standards Teams. Each team, made up of staff representatives from the different hospitals, agreed upon decisions about what could be standardized.

When the other CE LHIN hospitals eventually implement MEDITECH 6.0, the standardization results will ensure integration and the ability for all hospitals to electronically share patient information.

"We built MEDITECH 6.0 in line with the decisions that were made by the CE LHIN Hospitals Standards Teams" explained Ms. Walker.

... Continued on next page

..... Continued from page 1

As the implementation work progressed, Ontario Shores sometimes looked outside for expertise. In a number of cases, people were seconded from different CE LHIN hospitals and there was also help from other LHINs. For example, an interface subject matter expert from Markham Stouffville Hospital made a big contribution to the implementation.

In preparation for the "Go Live" date, over 600 staff received training and personal identification numbers that would enable them to access MEDITECH. On the actual day, the implementation team was prepared for anything. A centralized command centre, where the help desk was located, logged issues and dispatched assistants to help with problems. Team members, identified by their green shirts, roved the hospital looking to assist.

"It was a non-event. And that's a good thing," testified Jeanie Wright. "We didn't get the volume of calls we expected nor the issues. We didn't need the command centre operating around the clock for several days nor the weekend as anticipated. We wrapped up on Friday. It is the best implementation I have ever experienced, and I have seen many."

Congratulations to the Ontario Shores staff and management, and a gracious thank you to all the CE LHIN partners that supported the implementation. Work on the Phase II implementation of clinical modules, which is scheduled to "Go Live" in the fall of 2010, is already underway.

eHealth and Lean - a Good Fit!

What do cars and health care have in common? More than you might think. A management system that originated at Toyota and was coined "Lean" by Massachusetts Institute of Technology's quality improvement researchers is having a positive impact on patient care at Rouge Valley Health System (RVHS). Within a five month period, after being applied, Lean helped increase the number of patients receiving pre-operative surgical screening.

Michele Jordan, Vice President and Chief Transformation Officer, RVHS, credits the Lean method with helping RVHS achieve this impressive result. "Lean has two pillars," explained Ms. Jordan. "One pillar is respect for people and the other is elimination of waste. If you respect the people you are serving and the people who are delivering the service, you can design better systems."

Lean is a philosophy which recognizes that since front-line staff members are doing the work every day, they are process experts. It engages them in making the system better and focuses on only work that adds value for the customer".

Applying Lean to pre-operative processes began at something called a Kaizen event. In the world of Lean, Kaizen events are gatherings that focus on process improvement. In January, a team that included physicians, clinicians, management, IT staff, Ambulatory Care Unit staff, Admitting staff, Health Information Management staff and front-line workers gathered for four days to determine how to improve patient flow and quality in the pre-operative clinics and enhance the patient experience. Pre-Lean, the process would begin at a surgeon's office. After being told they need surgery, patients would usually go home and wait to be notified about their pre-operative clinic appointment and surgery date.

"At the Kaizen, we process mapped the pre-operative process from a patient perspective, examined workflow, and explored reasons for delays and bottlenecks," said Madeline Leathem, Manager Clinical Systems, RVHS. "In doing so, we realized numerous phone calls and faxes could be eliminated, as well as time lags reduced, by providing 26 surgeons' offices in Ajax with MEDITECH."

"Secretaries from the surgeons' offices, who had input on the process change, were given access to the on-line scheduling application used at the hospital's Ambulatory Care Clinic," explained Julia Baker, Nursing Manager of the Ambulatory Care Unit, Pre-op Assessment Clinic, Day Surgery Unit and In-Patient Surgical Unit at RVHS (Ajax Site). "Now they can book patient appointments for pre-operative screening themselves, which means patients have more information when they leave their surgeon's office."



Kaizen Team Members

The Kaizen took place in February; MEDITECH was implemented at 26 surgeon's offices in April and, by June, patient participation in pre-operative screening rose by 70%. "This is a great success story," exclaimed Ms. Jordan. "It worked because it was a collaborative effort. Everyone pitched in and did what needed to be done because they understood how the patients, hospital and surgeon's offices would benefit. We need these kinds of collaborations to make improvements and achieve success. No one person or department can do it alone."

The significance of the Lean Pre-operative Surgical Process has been recognized by HealthAchieve 2009. The process will be a feature poster presentation at the event's Celebrating Innovations Expo.

'Rossified' and Ready



The Ross Team

Two things gave it away. Team members were taking pictures, and the vendor representative was able to go home and sleep that night. Both were signs of a successful MEDITECH Laboratory implementation," said a laughing Shelley Miles, Manager of Applications and Projects, Ross Memorial Hospital (RMH). "If it wasn't going well, there is no way we could have stopped to take pictures!"

On September 30, with the help of Lakeridge Health, RMH implemented a MEDITECH laboratory system made up of Lab, Blood Bank, Pathology and Microbiology modules.

Lakeridge Health hosts the system on their servers and they contributed their MEDITECH expertise to get things up and running. The successful "Go Live" was a collective effort by the Laboratory and IT departments at RMH. Together, they jointly planned and managed the project with the support and expertise of LHC and MEDITECH.

RMH and Lakeridge Health began their partnership in November 2007 when RMH needed to implement a pharmacy system to replace one that was due to expire. Working with Lakeridge Health, RMH was able to leverage technical expertise and standards development experience. When it came time for RMH to replace its Laboratory system, it made sense to work with Lakeridge Health again. "The actual implementation worked well," explained Greg Young, Technical Director of Laboratory at RMH. "We copied Lakeridge Health's dictionaries; we took the system that they had running and copied it, made a few changes, "Rossified" it and tested it extensively."

Every organization has its own nuances that need to be addressed. When Lakeridge Health worked with RMH, they were flexible and didn't insist on their way of doing things. Instead they listened and were able to make dictionary changes to accommodate RMH. Mark Hoskins, Interim Manager of Clinical Systems, Lakeridge Health explains, "Lakeridge Health has been "live" with MEDITECH for 20 years and since then, new ways of documenting microbiology have been introduced. RMH chose not to go with our reporting processes in Microbiology and explored a paperless option. At Lakeridge Health, this exploration was valuable; we learned a lot from the experience."

Advanced planning helped the implementation. Before the implementation began, a team consisting of Builders (Pam Sleep, Susan Wallace, Pam Scholey, Charlene Pearsell and Barb Duguay) developed a change management process that ensured process changes would be documented and well tested.

Team Trainers (Nadine Aubertin, Alison Deitch and Terri Harris) tracked and documented requests during the end-user training. The team also worked with Lakeridge Health to create a project charter and scope document. This helped control the change and assisted lab staff in working with departments and individuals outside of the lab that would be impacted by the system change.

"Our partnership with Lakeridge Health has really helped us out. We didn't have to learn "life lessons" first hand. By adopting the standards set by Lakeridge Health we are able to capitalize on all the things that they have done right," stated Shelley Miles.

"Now that we can see and experience the advantages of MEDITECH, it has really made the HIS Consolidation make sense. There is great value in following standards. Now we're ready and positioned for other system improvements like the Ontario Laboratories Information System (OLIS).

HIS Consolidation

The CE LHIN Hospital's Vision of consolidation of our Health Information System (HIS) contributes to building a single electronic health record (EHR) for all our residents. It is being tackled on many fronts including; the HIS Consolidation Standards Project for MEDITECH (Phase I and II), development of clinical documentation standards, mental health documentation standards, developing common language and information for clinical transfer points and data centre consolidation to name a few.

MEDITECH Phase I – Standards Support



The "Go Live" at Ontario Shores was an important and impressive milestone that was made possible, in part, because of the hard work done by Phase I Standards Teams.

As a final step in the standards development process, a compliance review is currently underway. The CE LHIN Hospital test environment, "Sandbox" is a copy of the Ontario Shores environment, and has been reviewed and tested by each partner hospital.

As a quality control measure, each Standards Team had a volunteer review the Ontario Shores copy in the Sandbox to ensure that all dictionaries comply with the standards decided on in Phase I.

To date, all reviews for the eight modules have been completed except the HRM (Human Resource Management) module. As a result of the standards work, the decision documents that were completed by the Standards Teams have been posted to the SharePoint Site.

These decisions, which have created a strong foundation for the development of Phase II Standards, will be the basis for all future MEDITECH implementations of these modules.

Congratulations to everyone who has worked on Phase I. Your work is appreciated and will be useful to all the hospitals in the future as we continue to standardize.

MEDITECH Phase II – Update

Phase II Standards development is well underway, and the Perot Systems Project Team is two thirds complete in the site visits to each hospital. These 1-3 day sessions, attended by physicians, nurses, allied health professionals, management and administration is providing valuable information about how clinicians work and what information is gathered in the process at our organizations. The input is categorized and gathered into lists, or "dictionaries" along with previous decisions from Canadian consolidation projects (NEON up north and the RSHIP project from BC) and recommendations from Perot Systems based on their expertise of consolidation projects and current best practice.

All this information is being captured in a continually evolving workbook (updated as each site visit is completed) that will provide an overall picture or “baseline” for CE LHIN Hospital standards of the clinical modules.

After input from all facilities has been gathered, a complete workbook and resulting draft decision documents that reflect the commonalities and differences among the facilities will be created. The Perot Project Team will complete their site visits in November after visiting: Lakeridge Health Centre (Nov 2-4) and The Scarborough Hospital (Nov 9-11).

In November, MEDITECH Phase II applications (clinical modules) will be added to the Sandbox. As in Phase I, the Sandbox will provide the partner hospital members with an environment to “play”; review, test, and develop best practice standards.

Mental Health Documentation

The Mental Health Subcommittee of the CE LHIN Clinical Informatics Advisory Group is reviewing the Mental Health documentation of all CE LHIN facilities. They are evaluating entry / triage, assessments, discharge documents, and looking for common and uncommon data sets being documented at each hospital.

The review will conclude at the October Clinical Advisory Group Meeting where the Subcommittee will present recommendations for the standardization of mental health documentation across the CE LHIN.

Data Centre Consolidation (DCC) - Keeping you Updated

The Data Centre Consolidation Project involves twenty six hospitals, and one Community Care Access Centre within five LHINs who are collaborating in the planning and development of a data centre that provides reliable, world-class data centre(s) and hosting services that meet the demanding and growing needs of the health services sector in the five LHINs.

We are currently in the implementation analysis stage and are developing the Plan (Implementation Analysis Plan) with the direction and input of five committees/working groups: DCC Steering Committee, Data Centre Working Group, Governance Working Committee, Human Resource Working Group, and Finance Working Committee. These teams have representation from the partner hospitals in their professional capacities including IT Directors and CIOs, CFOs, COO, Human Resources management, and the LHIN CIOs.

The DCC Project Management team issued an RFP in October for a potential vendor. In December this part of the DCC will conclude with the finalization of a DCC Business Case.

Upcoming Events

Oct 26	DCC – Working Group Meeting
Oct 26	Clinical Informatics Advisory Group Meeting
Oct 29	DCC Steering Committee Meeting
Oct 30	Mental Health Subcommittee, Clinical Informatics Meeting
Nov 1	IM/IT Advisory Committee Meeting
Nov 3	DCC Governance Working Committee Workshop
Nov 3 - 5	Phase II Perot Site Visit - The Scarborough Hospital
Nov 9	DCC Data Centre Working Group Meeting
Nov 10 - 12	Phase II Perot Site Visit - Lakeridge Health Centre Site (Oshawa Campus)
Nov 19	DCC – Governance Working Group Meeting



LET US KNOW!

If you have any ehealth events that you would like to share contact e-update:

keskedjian@tsh.to

Celebrating Innovations in Health Care Expo

Metro Toronto Convention Centre,
Exhibit Hall C (North Bldg)
255 Front Street West
Toronto, Ontario
M5V 2W6

Congratulations to our organizations in Central East LHIN chosen to participate in the Innovations Expo - November 18, 2009, 11:00 am to 5:00 pm
The Expo is part of HealthAchieve 2009.

For information, and a list of participants, click on:

http://www.health.gov.on.ca/en/pro/ministry/innovations/docs/successful_applicants.pdf

Engaged Communities.
Healthy Communities.