



e-Update

e-Health at the CE LHIN 2009 Symposium

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e-Update is a communication tool developed to inform stakeholders of e-Health initiatives that involve service providers from across the Central East LHIN.

Health service providers are encouraged to share this *e-Update* with their board, staff, physicians and volunteers. To see more information, please visit www.centraleastlhin.on.ca and click on the link: Resource/ Documents/ Planning.

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

Last week, health care professionals, management, support staff and the public gathered for the CE LHIN 2009 Symposium. The event, which was launched with presentations by the CE LHIN Senior Team, included an overview of e-Health activity which was delivered by Regional Chief Information Officer, Lewis Hooper.

At the Health Fair, two initiatives Mr. Hooper discussed were demonstrated. There were several posters and print materials providing details about a variety of e-Health initiatives.

In almost all symposium sessions, the role of e-Health was discussed in some capacity. There were several discussions about data collection, using technology to integrate services and applying technology to patient self-care. In his keynote address about the Ontario Wait Times Strategy, Dr. Hudson, Chair of eHealth Ontario, stressed the important role e-Health plays in supporting system-wide improvements. He shared his conviction that e-Health and information technology will facilitate our ability to collect data, evaluate if patients are receiving the right treatment in the right place and help us in redirecting them if they are not.

During the Symposium Wrap Up, session summaries acknowledged the role e-Health can play in facilitating system-wide improvements, reducing wait-times, and helping patients manage their own health. For everyone working in e-Health, including the teams developing standards for our shared Health Information System (HIS), the Symposium was an important reminder about why we are doing this work. It's not just about the initiatives we are currently working on, it's about creating an e-Health foundation which will be responsive to future needs and emerging priorities which improve services and patient outcomes.



Francine McCatty, Applications Analyst, The Scarborough Hospital, demonstrates an e-Health initiative that enables the sharing of patient information with Yee Hong Centre for Geriatric Care

HIS Consolidation

The Project Plan

There were only a few days between the time the nine CE LHIN hospital CEOs approved the plan to create a single shared Health Information System (HIS), and the time we put the plan into action. The first Standards Teams were formed a couple of weeks later and hit the ground running. With only the essential planning tools in place, we had some very important learning experiences.

Now, with a few months of work already behind us, a complete Project Plan is firmly in place. This tool, which is located on the HIS Consolidation SharePoint at **HIS Standards/Project Plans/Standards Project Timelines and Work Schedule**, has been developed to facilitate the Standards Teams' work.

The Project Plan, in Excel, titled *Standards Project Timelines and Work Schedule*, contains a tab for each active Standards Team. Within a Team's tab is a list of meeting dates and the work that needs to be accomplished at each team meeting. The purpose of the plan is to help keep teams on schedule and ensure that decisions and progress are tracked. Viewing the plan will help team members understand their timeframes, what they need to do and the frequency of their meeting. The plan will also help us understand the impact of our decisions and plan for future implementations after Whitby Mental Health Centre "goes live".

Staff and management with access to the HIS Consolidation SharePoint are encouraged to explore the site and make use of the calendar feature. The Calendar tracks all HIS Consolidation meetings and with the click of a mouse, users can access meeting details and attachments such as agenda's and meeting minutes.

Decision Making

Shortly after a Standards Team is assigned, the members attend training at Meditech Headquarters in Boston. Back in Canada, the teams apply their training to making decisions about the modules they have been assigned. At each Team meeting, decisions are made and carefully documented for review by Meditech application specialists who will ensure decisions meet technical requirements such as data field lengths and the correct use of characters.

Following Meditech's review, decisions are sent to the HIS/EMR Integration Team (HIS/EMR stands for health information system/electronic medical record). This group reviews the work of Standards Teams. They ensure all dictionary decisions are well constructed, work is being completed and published, cross-team communication is occurring, and issues are managed. When the HIS/EMR team approves a decision it is considered final. In some case the HIS/EMR Integration Team will send back decision documents and request more information from the submitting team.

There are times when Standards Teams simply can not reach consensus. When this happens, the team refers--or escalates--the decision in question to the Oversight and Arbitration Committee. This Committee reviews and adjudicates escalated issues, and when they make their decision it is final and can not be challenged by the Standards Team that brought it forward.

After decisions are finalized by the HIS/EMR Integration Team, they are summarized in a Status Report that is forwarded to the Oversight and Arbitration Committee and the Advisory Steering Committee. The Central East Executive Committee receives a high level summary and decisions are posted on a SharePoint site that was developed for the HIS consolidation.

SharePoint Reminder

A tool we are using to keep the HIS Consolidation organized is SharePoint. Anyone working on the Consolidation project, including the e-Health Advisory Group can access the SharePoint to review all project documentation including status reports, decision documents and team terms of reference.

A useful feature of SharePoint is the calendar. It allows users to click on scheduled meetings for information that can include agendas and minutes.

Preparing for Phase II

At Whitby Mental Health Centre (WMHC), the Meditech Client/Server 6.0 Consolidation is being implemented in two phases: Phase I- mostly non-clinical modules and Phase II- clinical modules. In Phase I, which is underway now, all the modules which are being standardized, with the exception of Pharmacy, are non-clinical. The non-clinical modules form the core, or backbone of the Meditech Client/Server 6.0 Consolidation. In Phase II, which is expected to begin this summer 2009 and to be completed by August 2010, the following clinical modules and a cost accounting (non-clinical module) will be standardized and implemented:

- Imaging & Therapeutic Services
- Order Entry
- Patient Care System
- Enterprise Medical Record
- Bedside Medication Verification
- Physician Care Manager
- Cost Accounting

To assist with the Clinical Modules implementation, we will be hiring a vendor to facilitate and manage the process. A request for proposal went out on May 8 and we anticipate having a vendor selected by June 12.

What's New?

Live Meeting

The CE LHIN covers a large area--16,673 square kilometres to be exact--which means when the Standards Teams members meet, several of them have had long commutes and they are away from their worksites for several hours. As teams can attest, collaboration and consensus decision making requires relationship building which is best achieved face-to-face. As expected, requiring teams to work face-to-face has been advantageous, but now that a number of the teams have been working together for a while, we thought it might be beneficial to introduce "Live Meetings". This tool, by Microsoft, allows teams to meet online when they are not able to meet face-to-face. From different locations team members are able to view one another with the aid of webcams, they may access a chat feature while the meeting is going on, they can make discussion notes on an electronic "whiteboard", they can view documentation, link to the internet or "play in the sandbox".

Live Meetings is the next best thing to meeting face-to-face. Find out more by going to:

<http://office.microsoft.com/en-ca/livemeeting/default.aspx>

Playing In the Sandbox



You can talk about how something will work, but until you actually try it, you can't be sure it will perform the way you imagined. This applies to almost everything, including the creation of standards. Standards Teams discuss and debate how standards will be set up, but until they see it in the "system", it can be difficult to figure out what makes sense and what doesn't.

To assist teams in figuring out how their standards will be applied, we have created what we are calling the "sandbox". In this environment, teams are able to apply their standards decisions and see how they impact the decisions of other standards teams. Trying things out, making changes and experimenting in a "system" that

replicates the HIS we are building has great benefits. Team members, from all nine hospitals, are able to demonstrate the impact of decisions to their hospital colleagues and show them first-hand how things will work. The "sandbox" is an incredibly valuable tool which allows teams to validate and verify the decisions they make.

NEW TEAMS

Human Resource Management (HRM)

Name	Title	Hospital
Vera Arvanitidis	Payroll Coordinator	The Scarborough Hospital
Roxanne Cain	Scheduling Coordinator	Whitby Mental Health Centre
Pam Fanous	Payroll Manager	Lakeridge Health Centre
Kathy Gooding	Director, HR	Rouge Valley Health System
Dianne Kennedy	Application Coordinator	Lakeridge Health Centre
Marc Kobayashi	Applications Analyst	Rouge Valley Health System
Mary Wright	Payroll Manager	Whitby Mental Health Centre
Naseera Jiwa	Application Analyst	The Scarborough Hospital

Pharmacy (PHA)

Name	Title	Hospital/Company
Mehrdad Alizadeh	Clinical Pharmacist	Whitby Mental Health Centre
Linda Brown	Pharmacy Technician	Whitby Mental Health Centre
Barb De Rond	Clinical Leader	Lakeridge Health Centre
Susan Fockler	Pharmacy Technologist	Rouge Valley Health System
Heather Henning	Pharmacy Systems Coordinator	Peterborough Regional Health Centre
Melinda Jejna	Drug Distribution Supervisor	Whitby Mental Health Centre
Jamie Kellar	Pharmacist	Whitby Mental Health Centre
Terry Ledressay	IT Analyst	The Scarborough Hospital
Elaine Lee	Pharmacist	The Scarborough Hospital
Bob Ravelson		
Chris Ritskes	Pharmacist	Lakeridge Health Centre
Andra Sers	Pharmacy Technician	Lakeridge Health Centre
Linda Skinner	Clinical Leader	Lakeridge Health Centre
Jayne Spina	Clinical Pharmacist	Whitby Mental Health Centre
Jennifer Stager	Administrative Director, Integrated Services	Whitby Mental Health Centre
Victor To	Pharmacist	The Scarborough Hospital
Nancy Trimble	Pharmacist	Rouge Valley Health System
Tammy Trodd	Pharmacy Technician	Campbellford Memorial Hospital
Amulya Vemula	Systems Analyst	Peterborough Regional Health Centre
Leslie Gifford Cook	Applications Manager	Peterborough Regional Health Centre
Shelley Miles	Applications and Project Manager	Ross Memorial Hospital
Lisa Janes	Application Analyst	Rouge Valley Health System
Nander Stevens	Clinical Analyst	Whitby Mental Health Centre
Donna Foster	Manager, Clinical Informatics	Whitby Mental Health Centre
Brandon Woodley	Facilitator	Perot Systems



Members of the Pharmacy Standards Team

Upcoming Events

May 19-22
Pharmacy (PHA) Team Training
 Meditech Headquarters, Boston

May 25
Clinical Informatics Advisory Committee Meeting
 Whitby Mental Health Centre

May 27-29
Community Wide Scheduling (CWS) Training
 Meditech Headquarters, Boston

June 16-18
Human Resource Management (HRM) Assessment
 Whitby Mental Health Centre