Devices FAQs

Devices and technology used with the new EHR

What kind of devices will be provided to access the electronic health record?

Device assessments are currently underway at all Island Health facilities. This work is taking into consideration facility configuration and workflow design. Mobile and fixed devices will be deployed to support documentation and associated workflows. Updates will be provided as the assessments are completed.

Will there be enough devices so staff can access records in a timely way?

All efforts will be made to ensure there are enough devices. Although staff will not be receiving their own dedicated devices, the number of devices deployed for each area will take into consideration documentation frequency and number of staff on shift.

Is there going to be room for these devices in our work areas? What renovations are going to happen?

There is limited capacity and ability to make significant renovations. Devices will be deployed in work areas as appropriate. Given that there is a focus on mobile devices, there is a presumption being made that a high volume of renovations will not be required.

How will staff who are on the road a lot, or do not work in facilities, access records? What device will they be given?

Evaluations are underway to determine off-site options, knowing that wireless connectivity is not dependable across the Island Health geography. An “offline” documentation option, and other connectivity options, is being evaluated.

What is the strategy and approach to address care providers who roam between different computers?

We are examining certain technical improvements to our Citrix environment that will speed the time for smooth roaming. Device selection and placement will be key for this as well.

Will there be iPads?

The quick answer – in the near future no, but in the long term, we’re not sure. The iPad is very light and fast, but it is more of a consumer, single-user product – they are not washable and are easily dropped - we are concerned about the robustness of this device. Also we currently have no way to manage IOS devices from an enterprise level (patching, upgrades, security, and privacy concerns).

The tablets we are investigating now are " iPad-like" in terms of speed and usability, but are more aligned with enterprise manageability.

All this being said, the technical team is working on increasing and improving the health connect network, which will increase the scope of device and physician preference to support BYOD (bring your own device). Some Physicians are using iPads now for results viewing, but in a BYOD capacity. Cerner is also working on small form factor device/application options, but these will not be available for a couple of years.

So for now - probably not iPads...but in the future? Perhaps.

Will there be a unit camera available to take pictures of wounds and upload them into the EHR? This would help so much to take a daily picture to assess wound healing process. So much quicker than the long narrative documentation!

Wound cameras and photo upload have been used at Oceanside Health Clinic, and a policy and a procedure have been drafted to support this. The scope of how and who will use this functionality has yet to be determined for First Activation.

I have concerns about the log-on time it takes to get on to a computer, let alone into a client's record in the EHR. Is this being looked at? Will this improve before we transition to the new EHR?

The number of times, and the time it takes to logon, has been identified as a concern across the island. The teams have been trialing new solutions at Nanaimo ED and Oceanside Health Centre. Once the solutions are reviewed from a privacy and security perspective, they will be presented to the Island Health Executive for approval.

What does Infection Prevention and Control have to say about all the new medical devices we will be carrying around with us between patients?

Our device team will ensure the devices meet the requirements set out by Infection Prevention and Control standards.

For mobile devices is it possible to have a 'locator' feature, as equipment will inevitably get left behind at times?

The device team is aware that both theft and loss are a concern and strategies to manage this are being considered.

What is the strategy to support Bring Your Own Device (BYOD)?

The device team will be evaluating and providing BYOD recommendations.

Will I have remote access to the new EHR?

Remote access will be provided for those providers who require it. The EHR platform is available remotely from any computer with internet access, as it uses a Citrix-based voice protocol network (VPN) to host your session logon. This means that although you can operate your own computer as you normally would, no patient information will be stored on your device. This avoids the pitfalls of patient privacy concerns. You will be able to log in to the EHR and view medical imaging content via the PACS Intelliviewer program.

Can we have a summary of the devices that have been targeted for each area?

Yes. A summary will be provided to you in late January 2015; we will be welcoming your feedback. Please note that this summary is a first draft and the devices will be trialed and may need to be changed-out depending on real-time functionality when we activate the EHR in your care setting. This summary will help us ensure that we have not missed any temporary units.

How do we know that the devices we receive will be appropriate for our needs? Was this an issue at NRGH or OHC when they started using an enhanced version of the EHR?

When the EHR went live in the NRGH ED, devices that staff thought they would not like became the devices of preference. Preferences became clear when they came into use. The IHealth team will be involved throughout the activations and beyond, to ensure the devices are functional for the workflow.