

## The Goal of IHealth

The goal of IHealth is to improve the quality of our patients' care. As the Island Health population ages and becomes more complex, IHealth will be essential to be able to deliver quality health care throughout Vancouver Island. A regional, cross-continuum electronic health record (EHR) will capture all relevant data pertaining to patient care and connect care and providers meaningfully.

Through the use of EHRs:

- Medical errors can be minimized.
- The potential for medical adverse events significantly reduced.
- Digital information can be used to inform best-practice (for example, antibiotic choice can be matched to local pathogens and susceptibilities).

We are doing this so we can create a system that is safer for our patients with information that we can keep and use in a way that will allow us to make better decisions to provide better care for our patients. As we gather more and more data about our Island Health residents, we will be able to link interventions to patient outcomes and reliably evaluate their effects.

## Evolution, Integration and Customization of the New EHR

Island Health has partnered with Cerner to help create a system that will transform health care within Island Health and our community. The process of creating a single health record for each Island Health resident involves 5 main phases:

1. Integrate
2. Customize
3. Upgrade
4. Activate
5. Transition

Island Health's new EHR is being developed so it is available for all health care providers. It will also include community-based physicians who choose to become part of the system, and other community health care providers, such as physiotherapists and pharmacists, who need to exchange patient information with Island Health.

Eventually, patients and families will be able to have access to information that is appropriate for them to access, such as reviewing their schedules or recent test results.

The initial Cerner modules continue to be customized, expanded and improved to meet the needs of staff, physicians and clients. To do this, Island Health and Cerner worked closely with patient partners and Island Health representatives from across disciplines and care settings through regional workflow validation sessions.

Upgrades include:

- A new platform – upgrades to the look and feel of the *existing* EHR (no changes to functionality).
- First Activation – functionality, available only (at this time), to clinicians and physicians at NRGH and Dufferin Place.

## First Activation: Nanaimo and Dufferin Place

Activation 1 was split into two phases.

- In the first phase, an upgrade to the Island Health Electronic Health Record (EHR) platform was implemented island-wide on February 21, 2016. This change was foundational to the addition of new EHR functionality.
- In the second phase, new EHR functionality such as electronic documentation and computerized provider order entry (CPOE) was implemented at Oceanside Health Centre, Nanaimo Regional General Hospital (NRGH) and Dufferin Place on March 19, 2016.

These sites were selected for First Activation because:

- In 2013, we established a new electronic documentation system in the NRGH Emergency Department. Bringing the rest of NRGH onboard with electronic documentation helps to support the integration of care at this campus.
- Oceanside Health Centre was a test site for the first expression of the new EHR, which integrates client records from acute care, urgent care, medical day care and primary care. The addition of the new IHealth functionality brought improvements to the existing electronic and CPOE tools being used at this site.

After a period of stabilization at NRGH, Dufferin Place, and Oceanside Health Centre, the new functionality will be implemented in a continued phased approach at other sites within Island Health.

## Devices and Technology

To ensure that all providers have access to the necessary devices to be able to complete EHR-related tasks, Island Health is:

- Continuing to refresh older computers to the latest and newest computers.
- Increasing the number of devices in your care setting.

Members of the IHealth team are conducting device assessments and reviewing the needs of each care area and prioritizing:

- Mobility (e.g., workstation on wheels, laptops, tablets).
- Multiple device types (to suit different workflows, such as mobile computers, biomedical devices and barcode scanners).
- Faster logon and off-site documentation options.

Device demonstration areas, where are being set up at Royal Jubilee Hospital (RJH), Eric Martin Pavilion (EMP), Nanaimo Regional General Hospital (NRGH) and Campbell River Hospital (CRH). These areas will showcase new mobility options, rapid logon devices, special mounting gear and new mobile carts with longer battery life.

## Practice Changes

There will be some practice changes resulting from the IHealth initiative and activation of the EHR, related to:

- EHR functionality.
- New or improved devices and technology.
- Where and how you will document in a digital or paperless world (this means a fundamental change in practice, workflow, clinical decision support, documentation, and medication management).

Initially things will be slower as new tools and workflows are implemented. There may also be unanticipated changes in your individual practice, as the EHR forces clinicians to use evidence-based, current practice standards that everyone is expected to follow.

## Documentation

IHealth will improve patient safety and care by:

- Reducing errors.
- Supporting better care coordination.
- Improving care transitions.
- Facilitating individualized patient health and care planning.

Many of the benefits of the EHR rely on real-time documentation. One such benefit is the ability to see other clinician's assessment documentation in real time. Based on that assessment documentation, the EHR will also alert clinicians of potentially negative situations in patients (e.g., sepsis or VTE).

Documenting care and decisions, made with patients and their loved ones, helps ensure that all members of each patient's health care team are able to provide the most appropriate health care.

## Education

Because providing care in this new way may be a substantial change in how you work, we are committed to making sure you will have what you need to be successful.

We are designing an education plan so you can access the learning you need, when you need it.

Based on best practices, this education will include:

- What is important for documenting and care planning in an electronic health record.
- The specifics of each tool and application.
- Details on what needs to be documented where, how often and by whom.

Other education material that will become available includes:

- Online learning modules that you can complete at your own pace.
- Conversations on IHealth video series.
- Classroom sessions to help you learn how to work through the new features.
- Mentors and coaches for each role available to ask questions and provide feedback on your care area or call-centre.
- Other resources and tools to help you in the moment of need.

**Please note:** Training will happen at sites within each geographic region, in a timely way for each activation date. Site- and role-based education and training details will be made available on the IHealth internet site (<http://ihealth.islandhealth.ca/>).

## Resources

Your main source of information will be the IHealth internet site (<http://ihealth.islandhealth.ca/>).

This site contains:

- Information on how IHealth and the EHR will make our work, and our patients' experiences, better, more accurate and complete.
- Information on IHealth team members and roles (maybe you know a few).
- An event calendar – so you can plan how to get involved based on your role and region.
- Answers to frequently asked questions related to IHealth processes, general practices and specific care provider practices.

**Note:** The IHealth internet site is for everyone! This means that all members of the public are welcome to explore along with Physicians, Staff, other Health Authorities and the Ministry.

Major updates will also be distributed through various leadership meetings, direct emails, The Weekly and other communication channels, as appropriate.