

CMIO Roundtable Discussion

June 5, 2019, 9:00-10:00AM

Meeting Information

Phone: 205-206-9624

Access Code: 870-78-130

Skype Meeting Link: <https://meet.lync.com/makesolutionsinc/brian/D1B20SR3>

Sharepoint Site: <https://makesolutionsinc.sharepoint.com/sites/CMIORoundtable>

Attendees / Site

A	Dr. Paul Clark, CMIO, Concord Hospital, NH	X	Dr. Mandy Halford, CMIO, Covenant Health, TN
X	Holly Ellison, CNIO, Concord Hospital, NH	X	Dr. J. Clay Callison, CMIO, UPMC, TN
X	Dr. John Paul Jones, CMIO, Centra Health, VA	A	Chris DeFlicht, CMIO, Penn State Health, PA
X	Sandra O'Loughlin, PA, Concord Hospital	X	Ashley Petit, CIO, Northside Hospital, GA
		X	Christie Wright, Dir Phys Team, Northside Hospital, GA

Agenda

- **Concord Hospital**
 - Using PowerPlans in the Ambulatory setting
 - Demo by Sandy O'Loughlin
 - Have not done PowerPlans for in-office labs yet
 - Diabetic Supplies set as Public favorites
 - No issues yet with wrong associated diagnosis for billing
 - Other sites using Quick Orders
 - Ability to break out into folders by disease
 - Provider education & mentor program
 - Since go-live in December, 2017, going back to work with providers to focus on optimization and fixing bad workflows
 - 15 providers in mentor program who have an interest in coaching, mentoring, and savvy users
 - Mentor group meets bi-weekly for 90 minutes and then follows up with peers
 - Started with basics to baseline everyone, now into focus education
 - Example: 15 providers coming in from ED to focus on optimization
 - Mirroring in nursing space as well, including using Ladder program to allow nursing to engage in informatics program
 - Mentors participate in User Acceptance Testing
 - eCoach project kicked off
 - Centra using, but not well because of competing priorities. Those using it find it valuable
 - Northside using it, but struggle with content
 - New eCoach functionality called Insight available. Pulls in LightsOn Advance data to show where a provider is slower than peers and recommends appropriate content to review
 - Apolla Roth at VCU discussed new Insight functionality at recent NARUG
 - More information on Insight: <https://connect.ucern.com/docs/DOC-589692>
- **Covenant Health**
 - Acute Provider Workflow for clinically resolved problems on the problem list prior to discharge/discharge summary creation

- Example: Presented with Sepsis on admission and resolved by day three. By the time provider gets to discharge, it's still counted as relevant
 - In "This Visit", Problems map to Diagnosis code
 - Chronic Problems map to problem section
 - The Post-Acute provider is in the position to determine if Problem has been resolved
 - Anything not chronic falls off after current visit
 - UT: Not using Problem list for diagnosis. Freetext assessment and plan problem list
 - Hospital problem list wasn't relevant
 - Inpatient hospital documentation was poor for coding
 - Put Problems in Chronic conditions
 - Northside: pushback from hospitalists that Problem List is too cumbersome
 - Covenant looking to have meeting with Cerner strategist to discuss Problem List
 - Dr. Halford to pass on to group to have multiple clients on call
- Are non-clinical scribes utilized in ED or other venues? If so, do they allow scribes to enter problems obtained verbally from the provider.
 - UT getting ready to use scribes
 - Want to allow scribes to enter problems and diagnosis
 - At Covenant, regulatory team concerned about chronic conditions being at patient level entered by non clinician
 - Centra using non-clinical scribes to enter problems
 - Northside to check on use of scribes
 - Concord was able to discontinue use of scribes
- Does anyone plan medication reconciliation? If so, do you have a report to monitor timely initiation of planned med rec?
 - Centra: Inadvertently turned on, when tried to turn off, providers wanted back on
 - Covenant has custom rule for nursing to initiate PowerPlans, but don't have a custom rule for meds rec.
 - UT does have one in place for med rec and document meds. Clay to share
 - Plan button turned off for discharge. Initiates immediately
 - Tweaked standard rules
 - Mandy to share with Concord rule for initiation to drop task
- **University of Tennessee**
 - No items at this time
- **Centra Health**
 - History: Go-live Sept 1, 2018, in four hospitals, with 26 practices, four EDs, 13,000 new users.
 - All ambulatory previously on AllScripts.
 - Paused on bringing additional 16 practices into Cerner
- **Northside Hospital**
 - History: Went live Oct 27, 2018, inpatient only
 - Pending ambulatory project for future phase
 - Significant work on creating a physician liaison and physician advisory team

Proposed agenda items for next meeting

- Medication Reconciliation
 - Make entire basis of next meeting
- Orders to scheduling
- Operational Reports
- Creating Patient Lists and having visibility in clinics to inpatient

Follow-Ups

- HIM Setup and Deficiencies
 - Covered on prior call that Concord, Covenant, and Northside participated in
- Dr. Halford to let sites know when meeting with Cerner strategist has been scheduled to review the Problem List
- Dr. Halford to share custom rule for nurse initiation of PowerPlans
- Dr. Callison to share custom rule for medication reconciliation and documenting meds

Module	Concord	Covenant	UT	Centra	Northside
Cerner Code	2015.01.28	2015.01.25	2015.01.xx	2015.01.xx	2015.01.xx
2018 Upgrade	Starting Sept	Starting Dec			Starting July
MPages	6.09	6.11			
Dictation	Dragon	MModal	Dragon		
Rev Cycle-Acute	CPM	Sched	Reg/Sched		Reg/Sched
Rev Cycle-Amb	CPM	CPM	CPM		
Financials	Cerner Rev Cycle	STAR	HealthQuest		STAR
Population Health	Registries, EDW	No	Local HIE for registries		No
Surgery / Anesthesia	Yes / Yes	Yes / Yes			Yes / Yes
Lab	GL, BB, AP, Micro	GL, BB, AP, Micro			GL, BB, AP, Micro, Helix
Radiology / PACS	Cerner / GE PACS	Cerner / MMI PACS			Cerner / PACS
Bridge	Milk, Blood	Milk			Milk
Patient Tracking	Cerner Cap Mgmt	Teletracking			
Oncology	No	Yes	Yes. No regiments		No
Maternity	Yes, + FetaLink	Yes, + FetaLink	Starting 3/19 with clinics		Yes, + FetaLink
Portal	Yes	Yes			Yes
EPCS	In progress	In progress			
PowerChart Touch	No	Yes			No
Nurse Comm/CareAware Connect	No	Yes			No
Clairvia	No	No			Starting 2019
Commonwell	No	Yes	No	Yes	No
BMDI/MDI	Yes	Yes			Yes
Others		Behavioral Health	Transplant		