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St. Joseph's integrates ED documents with EHR via scanning solution

BY DIANNE DANIEL

TORONTO – Starting this spring, St. Joseph's Health Centre, in Toronto, is making it easier for clinicians to review Emergency Department (ED) visits by patients – and they won't have to leaf through pieces of paper to do it.

As part of a multi-phase strategy to move to an integrated electronic patient record, the 376-bed community-based teaching hospital is going live with a project to make ED paper-based charts accessible on-line. The project is the result of a two-year effort and is considered a necessary interim step on the journey towards a full-fledged electronic record.

"The reason we decided to start with Emergency is it's a very centralized, focused chart," says RoseAnn Pacheco, St. Joseph's director of health records. "It is a critical department, and a lot of clinicians want to know about a patient's ED visit."

The project began with a comprehensive vendor selection process. Topping St. Joseph's list of requirements were ease of use, the ability to integrate with Allscripts' Sunrise Clinical Manager and compliance with privacy and security needs, all of which were met by Microdea Inc., of Toronto. The health centre was also pleased to work with a local vendor, says Pacheco.

Using Microdea's Synergize for Electronic Patient Records, St. Joseph's is scanning paper charts after patients are fully discharged from the Emergency Admissions-Discharge-Transfer (ADT) system and then making the information available hospital-wide through the familiar Sunrise Clinical Manager interface.

Rather than learning an entirely new process, clinicians simply click on a new tab in the electronic patient record, called Scanned Documents, and can access everything to do with a patient's emergency department visit, including nurses' notes, doctors' notes, test results and consult notes.

"We want Sunrise Clinical Manager to be a one-stop shop for our end-users,"

notes Bohdan Sadovy, project manager at St. Joseph's. "We didn't want them to have to leave the application and log into yet another one."

Providing seamless integration with hospital information systems is one of Microdea's strengths, says Colin Ruskin, the company's vice-president of business development. "What's unique is that we're accommodating client needs with cost-effective, off the shelf software," he explains. "Synergize is highly configurable, easily deployable, and is continually evolving to meet the needs of healthcare organizations."

With 93,000 patients visiting St. Joseph's emergency department last year, the scanning effort represents a significant volume of paper that will now be accessible on-line, eliminating the need to retrieve files from Health Records. Once the information is in Synergize, Health Records has the added advantage of controlling who has access to what, as well as what they can do with it. For example, they can restrict a

chart from being printed, they can permit it to accept annotations, or they can lock it, making it impossible for anyone except those with authority to view it.

A web-enabled application, Synergize also syncs with the hospital network so that user names and passwords remain the same. "We wanted it to be a no-brainer; an application you'd be able to quickly figure your way around and I think we've achieved that," says Pacheco.

One of the benefits is the ease of use of the viewer, she adds, noting that the chair of St. Joseph's Health Records Committee, Dr. Arthur Vanek, was one of the first to use the custom tab during testing. "He just sat down and did it," she says. Some of the features include the ability to enlarge items, view two at a time, rotate them, invert colours or zoom in and out on different sections.

Looking ahead, Pacheco hopes to replicate the scanning process in other outpatient areas that experience high volumes, like same-day surgery. For now, Health Records has made the decision not to back-scan patient records and is working on a day-forward basis. Meanwhile, scanned charts will be boxed and kept for a period of about six months before being destroyed altogether. The ongoing effort is the first step towards full on-line patient documentation, she says.

"Scanning and making our ED charts available online to clinicians is part of the foundational work that will pave the way as we move towards a complete point of care electronic patient record. Our commitment to putting patients first has even led us to rename all this work, typically understood as "eHealth", to eCare, to better reflect how patient care will be transformed through improved processes enabled largely by technology," says Andrew Brearton, St. Joseph's chief information officer and chief of eCare. For more information about the eCare project please visit: www.stjoe.on.ca/about/ecare.php



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