Electronic Health Record Update

Island Health September 24, 2020

Cerner Code Upgrade Scheduled for September 26-27, 2020

Intended Audience: All Island Health Clinicians and Providers using PowerChart and FirstNet

Topic/Summary:

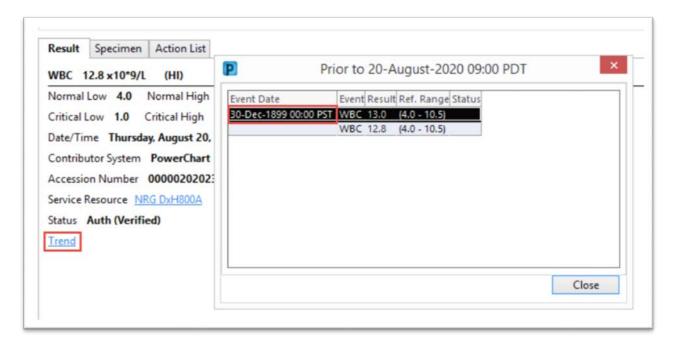
- Fixes For Previously Tracked Issues
- Enhancements
- Identified Issues With New Code
- Registration Specific Changes

FIXES FOR PREVIOUSLY TRACKED ISSUES

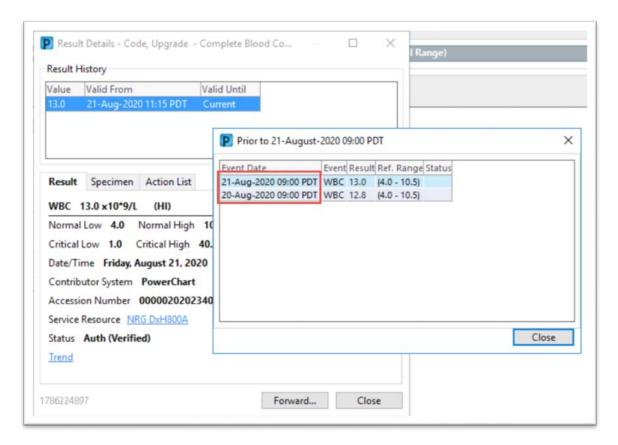
1. Trending Function for Results

Providers had reported issues with the trending function for results with dates defaulting to 'December 30 1899'. This has now been fixed in the 2018.02 Code upgrade, with accurate dates populating the trending section of the chart.

PREVIOUS:



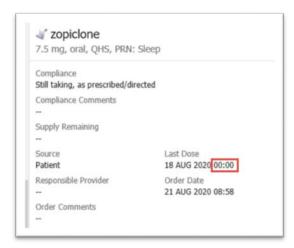
NEW:



2. Home Medication Compliance

When documenting a home medication compliance last dose date/time, clinicians were having to put in a time to make the date display (even if the patient was unsure of the time of dose). With the upgrade, clinicians have the option to leave the dose time blank, and the date will continue to be saved and visible.



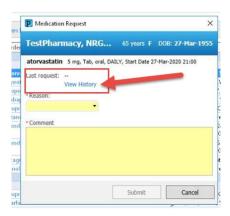


3. Medication Request History Available

With the upgrade, clinicians will now have an easier way to view when a medication was last requested to be filled by pharmacy

PREVIOUS:



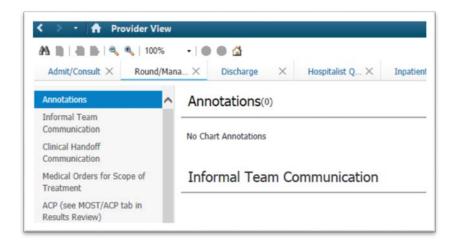


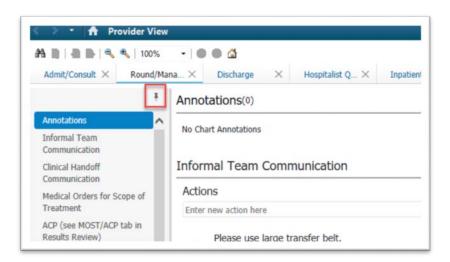
ENHANCEMENTS

Summary:

Several changes have been made to improve the usability of workflow pages like Provider View from smaller screens and devices. One example is the new ability to 'pin' the side panel in Provider View; in the current code version, this navigation panel would automatically minimize on smaller screens. Clinicians and providers who use non-standard screen sizes will likely notice several view improvements. In general, there is a reduction in 'white space' and automatic adjustments of workflow components to adjust for screen size/resolution.

PREVIOUS:



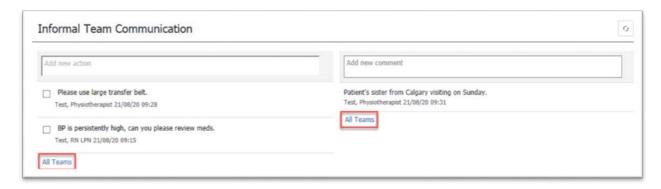


Listed below are several components in workflow pages such as Provider View or Nursing Handoff that will have noticeable changes after the Code Upgrade.

1. <u>Informal Team Communication:</u>

a. Functionality is the same; the component now displays for the selected care team only versus all teams. This allows for future enhancements with the use of care team specific communication. Currently Care Teams are not implemented at Island Health.

PREVIOUS:



NEW:



2. Documents component

- a. Addition of the In Progress Section
- i. This section can be collapsed if needed, by clicking the In Progress header PREVIOUS:

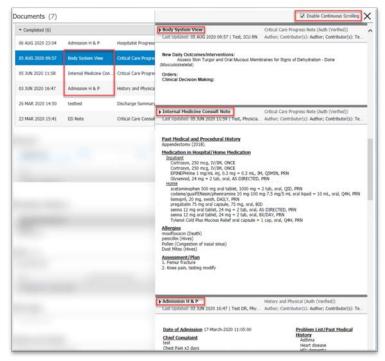


NOW:



b. Continuous Scrolling to Review Documents

i. In the current code version, a provider or clinician must click on each document to view the text. With the code upgrade, an enhancement has been made to allow for faster review of multiple documents, via the 'Enable Continuous Scrolling' option. This option allows for seamless scrolling through multiple documents without extra clicks.

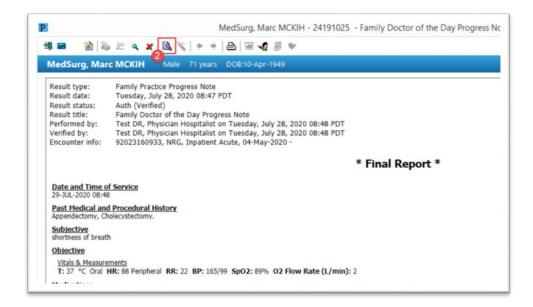


c. Easier to modify

i. In the current code version, a provider or clinician had to click once to open the document, then again to make a modification or addendum. After the code upgrade, it will be possible to open documents to modify with a single click from Provider View.

PREVIOUS (2 clicks):



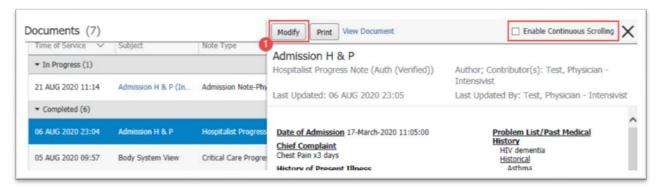


NOW (1 click):

For In Progress Notes that require signing or editing, click the Subject, which is a blue hyperlink to the editing page.



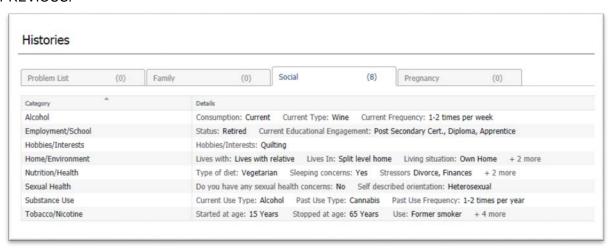
For Completed or Signed Documents that require addending, select Modify when viewing the document. Please note that this is only available when the "Enable Continuous Scrolling" isn't selected, see below.

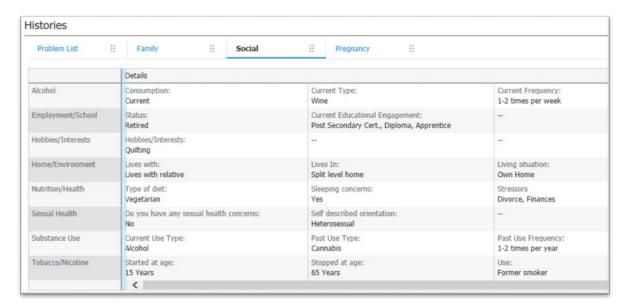


3. Histories:

a. Comment icon has changed and appearance modernized. Social history information display improved.

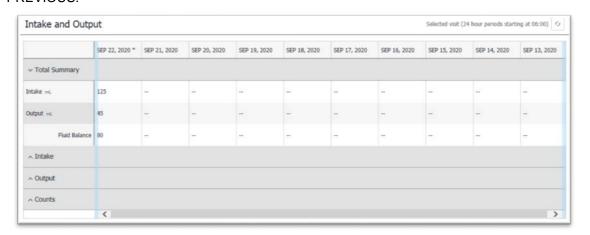
PREVIOUS:



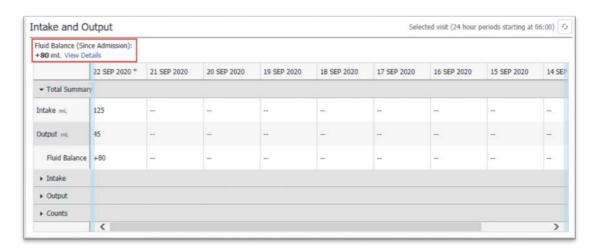


4. Intake and Output

a. Fluid balance since admission now displays.PREVIOUS:



NEW:

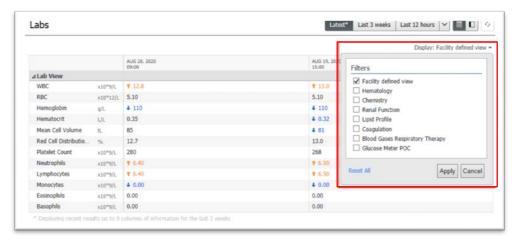


5. Labs

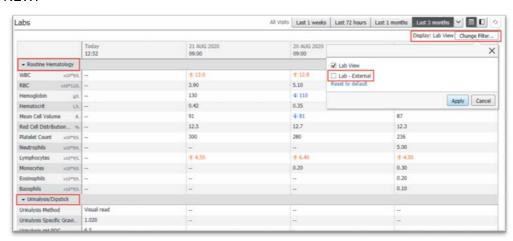
- a. In the current configuration, the Labs component in various workflow views is not standardized
- b. After the upgrade, the Labs component in all workflow views will have one standard configuration that will group results similarly to the view in Results Review (i.e. Routine Hematology, Urinalysis, etc.)
- c. Filters will enable the view of internal (Island Health) and external (e.g. LifeLabs) results, when available. Please note that only certain external labs will result within PowerChart and eHealth Viewer remains the main source for external lab results.
- d. The default for this new Labs component will be to only display internal labs. To view external labs, use the Change Filter button.

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PREVIOUS:



NEW:



6. Microbiology

a. The current code version of the Microbiology component in Provider view requires clicking into the result to obtain the organism name. With the code upgrade, the organism name will be viewable directly in the component.

PREVIOUS:



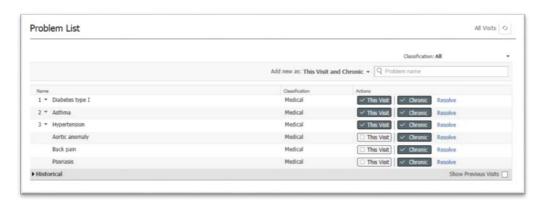
NEW:



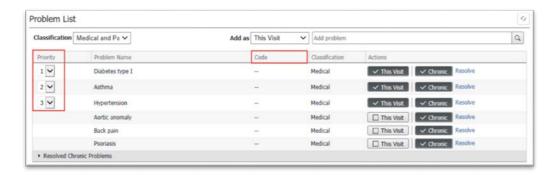
7. Problem List

 a. Improved display through a more forward facing design, including clearer access to change priority level. Please note that although the Code field now displays, it will not pull any codes for the diagnoses.

PREVIOUS



NEW



8. <u>Immunizations</u>

a. Where the exact date of an immunization is unknown, the new code will allow for estimates related to week, month or year.

PREVIOUS (exact date required):



NEW:



9. Allergies

There are two new changes in the electronic allergy record.

a. There is a new icon, a triangle on the allergy control within the workflow page component indicating non-medication allergies. This indicates that the allergy will not be included in any automated drug allergy checks.

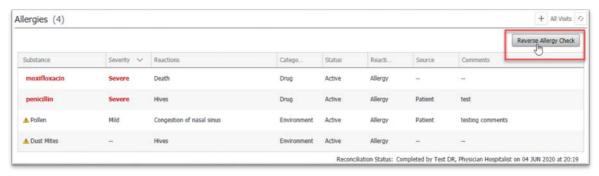
PREVIOUS: No Icon



NEW:



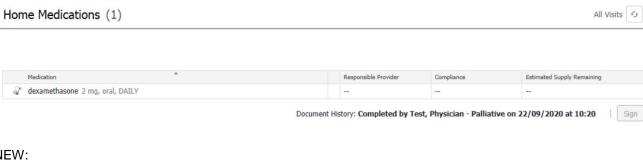
The Reverse Allergy Check button has been added to the workflow page component. This button requests the system to analyze all medications on the patient's record for any allergy related clinical decision alerts.

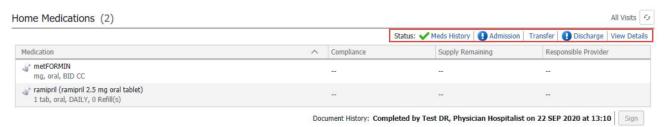


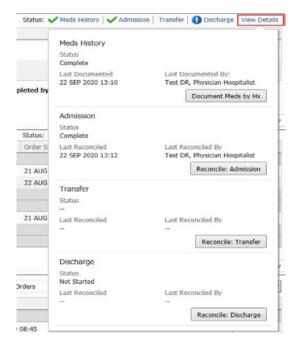
10. Home Medications

- a. Improved appearance and display which includes the Reconciliation Statuses at all times
- b. Addition of the new View Details button that displays further information about medication reconciliations

PREVIOUS:







11. Order Profile

- a. There are several changes and updated display and icons.
 - Order Type icon and placement (
 - a. Inpatient Order refers to orders used at acute care sites (i.e. NRGH)

PREVIOUS:



NOW:

b. Ambulatory In Office Order - refers to orders administered at an outpatient clinic/unit (i.e. Primary Care clinic)

PREVIOUS:



NOW:

c. Prescription Order – to be taken by patient in the community

PREVIOUS:



NOW:

ii. Order Comment icon and placement

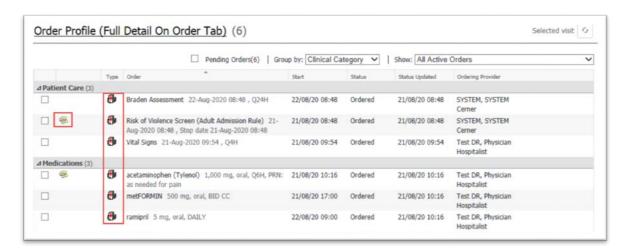
PREVIOUS: **

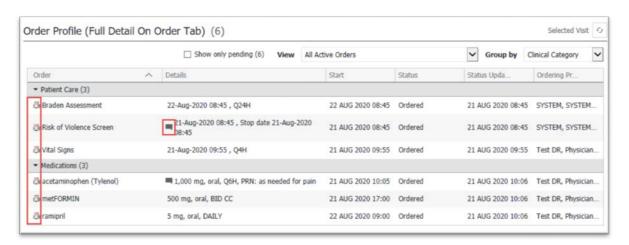


NOW:

iii. Order and Order Details now in two separate columns

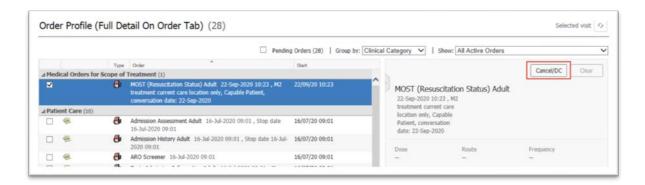
PREVIOUS:

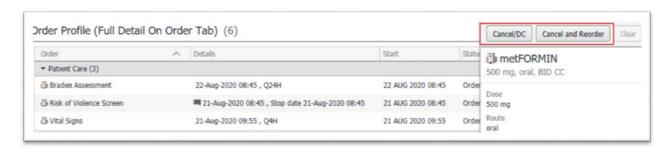




Cancel and Reorder directly from Provider View versus only being able to Cancel previously.

PREVIOUS:

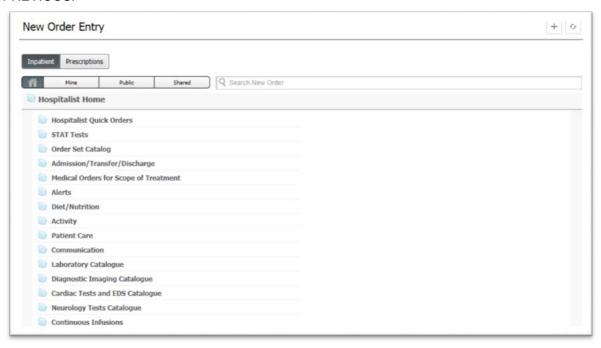


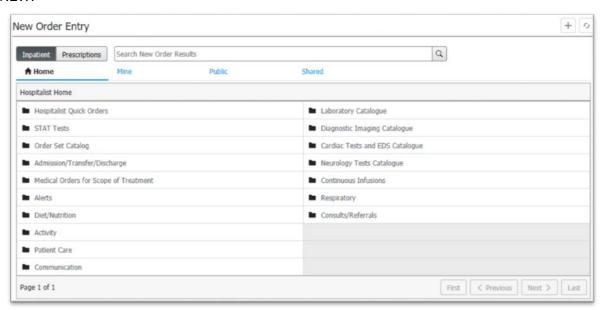


12. New Order Entry (Provider View)

a. Updated appearance for access to favourite and position folders. This change was made to improve the appearance and ensure a consistent look across similar components

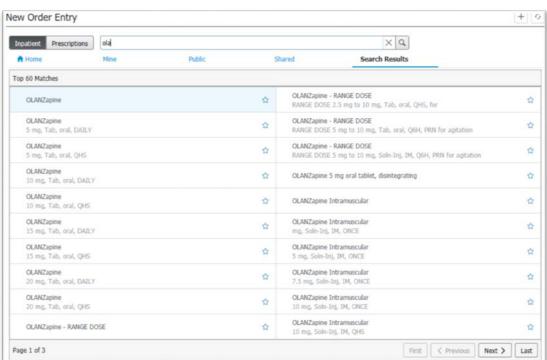
PREVIOUS:





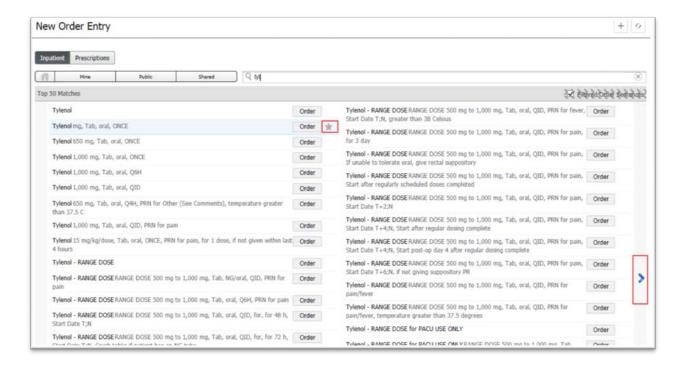
- b. Order searching changes
- i. No longer need to hit "enter" to see all search results. The list will populate as you type. PREVIOUS:

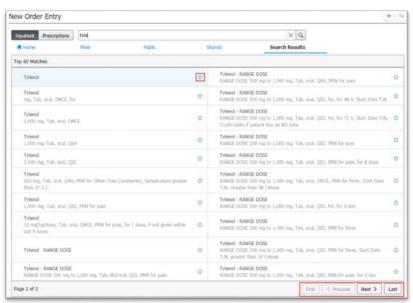




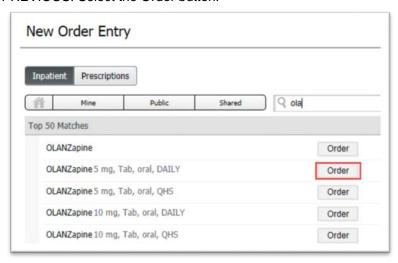
c. Improved ability to add orders to favourites through the presence of the "star" buttons on each order and navigation between pages when lengthy list of results through clearly labeled Next and Previous buttons.

PREVIOUS:

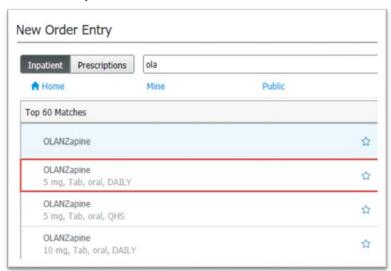




d. Different way to select an order from the list. PREVIOUS: Select the Order button.



NEW: Click anywhere on the order



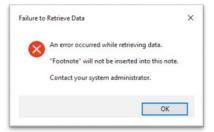
IDENTIFIED ISSUES WITH NEW CODE

1. Error when Tagging Preliminary Results

Currently, it is possible to 'tag' documentation from clinical documents that are in a preliminary state (i.e. Histopathology reports, Preliminary imaging results, unsigned consult notes, etc.).

After the upgrade, tagging this preliminary documentation will result in an error message. Tagged content can still be added to the document; however, the footnote section that gets added to the bottom of your note will be empty. In current state, this footnote describes the document and its author, where content has been tagged from.

a. The error message will be as follows:



b. Footnote created will not display any content when tagging from a preliminary report.

PREVIOUS:



NOW:



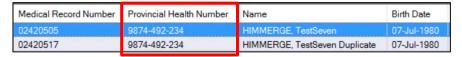
NOTE: As an interim solution, one may choose to preface tagged content from preliminary documents with the author's name and date of the report. Island Health has reported this issue to Cerner, and a correction will be communicated when received

REGISTRATION SPECIFIC CHANGES

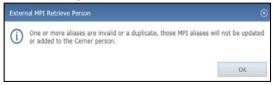
1. <u>Creation of duplicate BCID or PHN aliases through Person Management Registration/Scheduling Conversations no longer permitted.</u>

After code upgrade, the creation of duplicate BCID or PHN aliases will no longer be permitted through Person Management (PM) Conversations. An example of a duplicate alias is multiple patients (MRN's) with the same PHN.

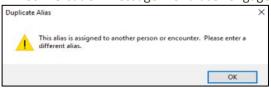
• When a duplicate alias is observed, this needs to be reported to the HIM Data Remediation and Quality Team: Merge HealthRec-mergingduplicatepatientsvisits@viha.ca



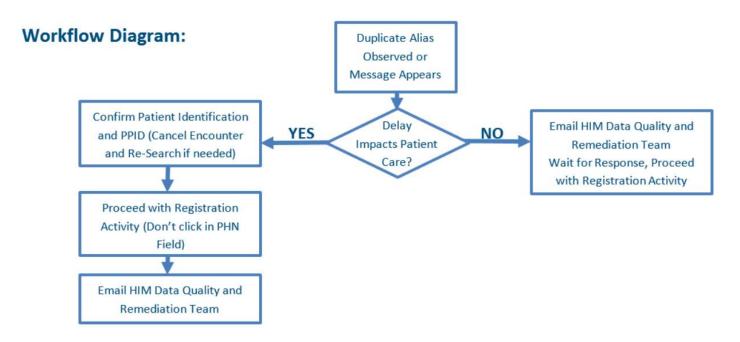
- The Registration/Scheduling process can proceed where a duplicate aliases exist; however, workflow is impacted if the end user clicks in the PHN field of the conversation. When the PHN field is selected in the conversation, the following messages display:
 - o EMPI Message:



PM Conversation message if end user engages the PHN field:



- To continue with the Registration/Scheduling process:
 - o Click **OK** to dismiss the **Duplicate Alias** message.
 - o Complete a new person search and continue with the Registration activity <u>without</u> clicking through the PHN field.
 - Email the HIM Data Quality and Remediation Team (see above note) for the duplicate alias remediation.
- A summary of the resolution workflow for this issue is described below:



REFERENCES

 Global link to: <u>Duplicate Alias | Registration</u> Quick Reference Guide (https://connect.viha.ca/academy/ihealth/Site%20Documents/duplicate-alias-registration.pdf)

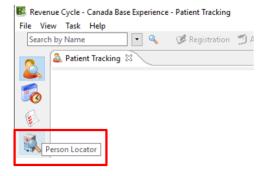
2. Person Locator in Revenue Cycle

What You Need to Know:

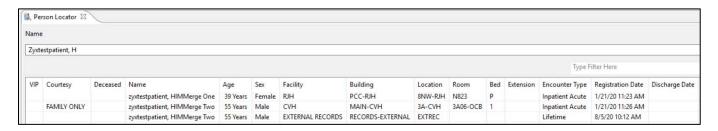
After the code upgrade, Person Locator in Revenue Cycle will be used to respond to patient location requests.

How to locate and use Person Locator

- From the Start icon -> Citrix Program Neighborhood, navigate to the Revenue Cycle application
- In Revenue Cycle, select the Person Locator icon to open the Person Locator perspective



 In the Name field, enter the patient's Last and First names as provided. Select Search. The patient results are displayed



REFERENCES

Global Link:

<u>Person Locator Revenue Cycle</u> (https://connect.viha.ca/academy/ihealth/Site%20Documents/person-locator-revenue-cycle.pdf

3. Lock Manager no longer accessible from AppBar

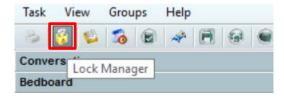
What You Need to Know:

After September 27, 2020, the Lock Manager will be available in PM Office and the Scheduling appointment book.

How to locate and use Lock Manager

From PM Office:

• Launch Lock Manager from the icon in the Toolbar



From the Scheduling Appointment Book:

Launch Lock Manager (View Locks) from the icon in the toolbar



NEED HELP?

The Clinical Service Desk [CSD] and Clinical Informatics team are prepared to help with any questions or concerns regarding the update

The CSD is available 24/7, seven days a week at 18777, option 3