

EMR OVERVIEW

Adrian Hutchinson, Chief Nursing Information Officer / Manager Clinical Technology



Parkville
EMR



ROYAL CHILDREN'S HOSPITAL



340 beds (plus ~35 hospital @ home)

Inpatient episodes 48k

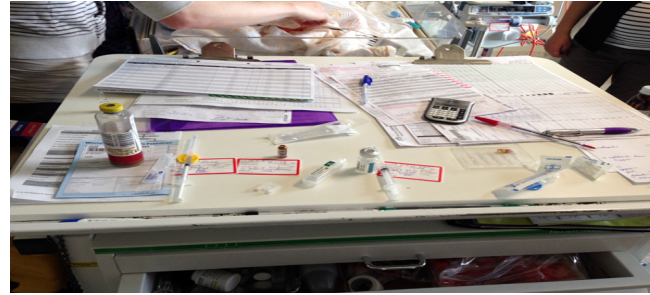
Emergency Department attendances 85k

Operations 20k

Ambulatory attendances 285k

~ 6000 campus staff. ~4000 trained in EMR for go-live





Details of operation:

Findings: *Subfalcine hernia*
and some
Subfalcine hernia completely removed
by using microdissection at end of
the tumor

Procedure: *done* *Removed to go to pathology*

Weight: **8.28 (kg)**

ONCE ONLY MEDICINES

Date Prescribed	Medicine (Prescriber's Name)	Route	DOSE	Time to be given	Prescriber Signature First Name	DOSE Calc e.g. mg/kg per DOSE	Given by	Date/Time Given	Pharm
1/3	Brackl	Oral	500mg	Stat				1/3 2/3	
1-3	Roxithromycin	Oral	250mg	po			bb	2/3 1/3	
2/3	Vancomycin	Intr	1000mg	Stat				1/3 2/3	



Potential for real improvements in:



- Clinical care
- Patient safety
- Patient / family engagement
- Throughput
- Efficiency
- Research
- Financial performance

Guiding Principles:



Peter Mac
Peter Mac Cancer Centre
Melbourne



The Royal
Children's
Hospital
Melbourne



the women's
the royal women's hospital



The Royal
Melbourne
Hospital

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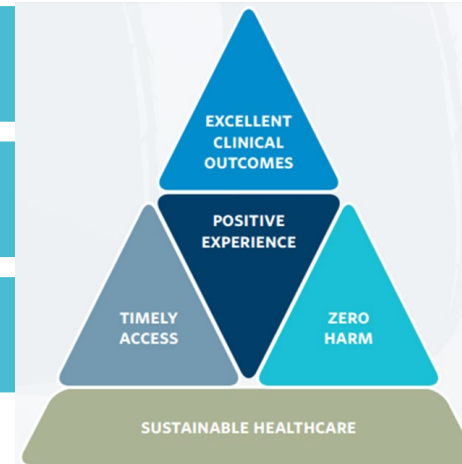
Be evidence-based to deliver the safest possible care

Standardise practice to reduce variation/duplication

Be easy to use

Drive efficiency and reduce waste

Support clinical effectiveness and research



RCH

APRIL 30TH 2016



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BIG BANG IMPLEMENTATION



AUGUST 2020

PARKVILLE

COVID IMPLEMENTATION 😊



CANBERRA IMPLEMENTATION



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How we implemented, governance and success factors

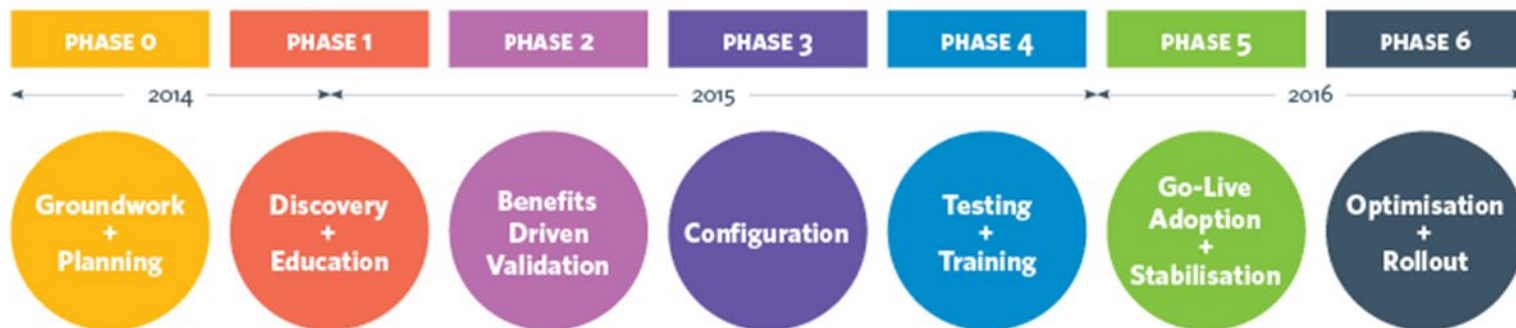


IMPLEMENTATION APPROACH



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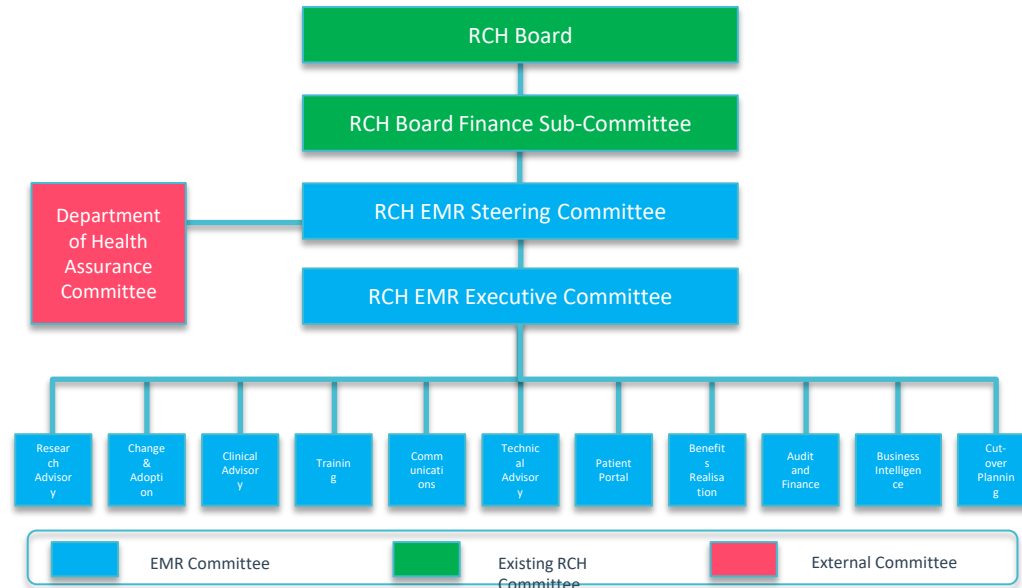
Electronic Medical Record (EMR) implementation



EMR PROJECT GOVERNANCE



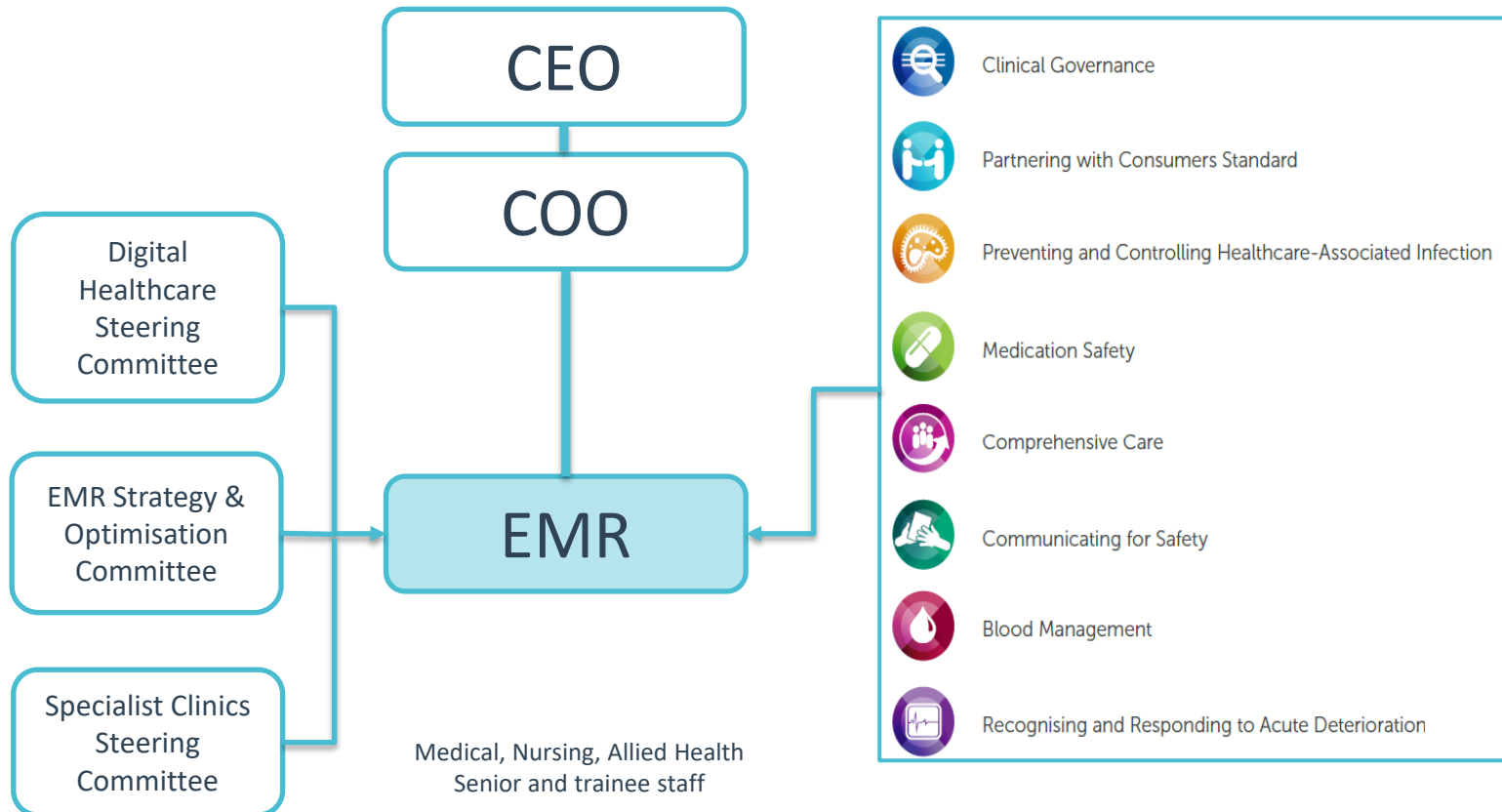
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GOVERNANCE



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Success factors - team



EMR team

Many analysts were clinicians

External recruits to fill skill gaps

Emphasis on training – mandatory

Governance committees

Clinical decision making

Management team

Recruitment to EMR advisors (Drs),
trainers, super users positions

Vendor support team

Strong onsite support from Epic

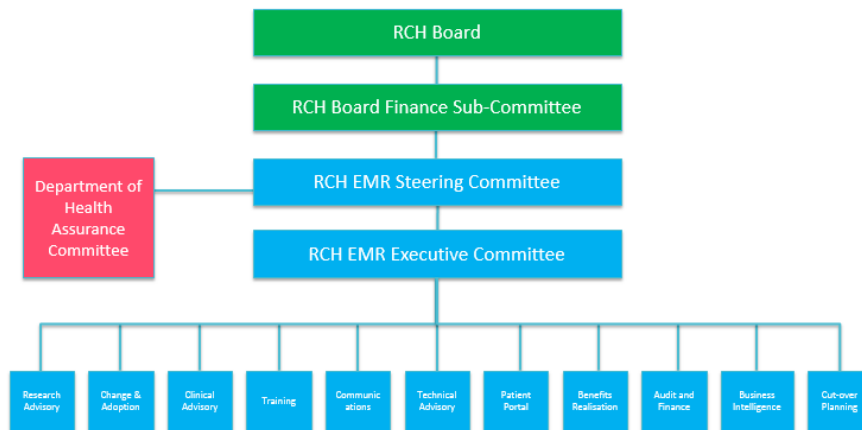
Strong support model from Verona

Not an IT project!

Success factors - governance



- Strong internal governance structure
- Commitment from all levels
- Executive leadership
- Managers program
- Focus on EMR project



Benefits tracking

- Staff satisfaction
- Revenue
- Expenditure
- Efficiency
- Quality and safety



Peter Mac
Melbourne Cancer
Centre



The Royal
Children's
Hospital
Melbourne



the women's
the royal women's hospital



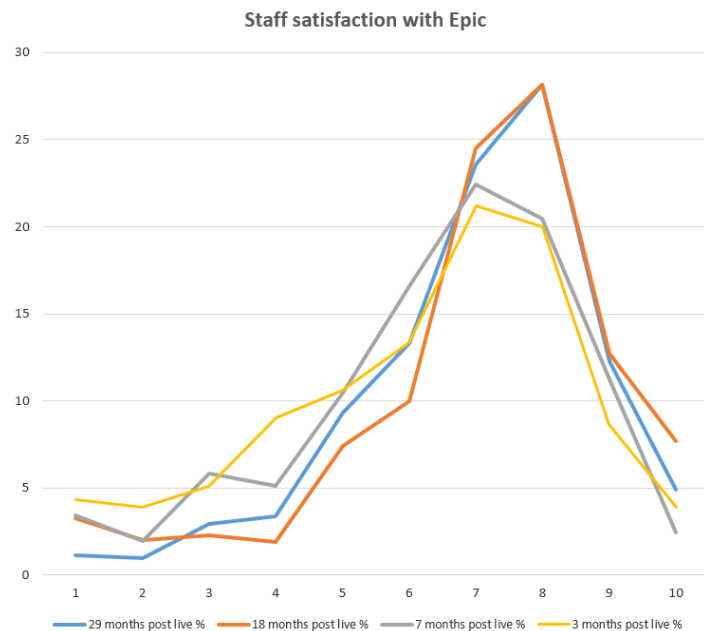
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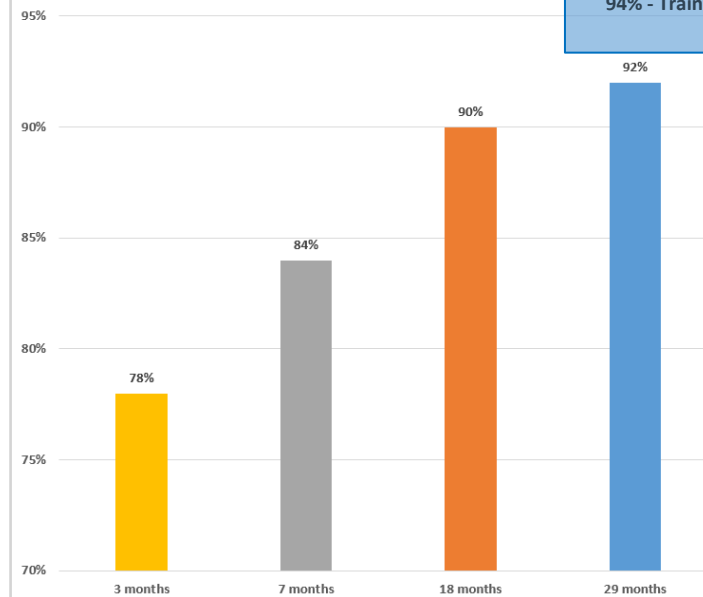
STAFF SATISFACTION



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PETER EMR

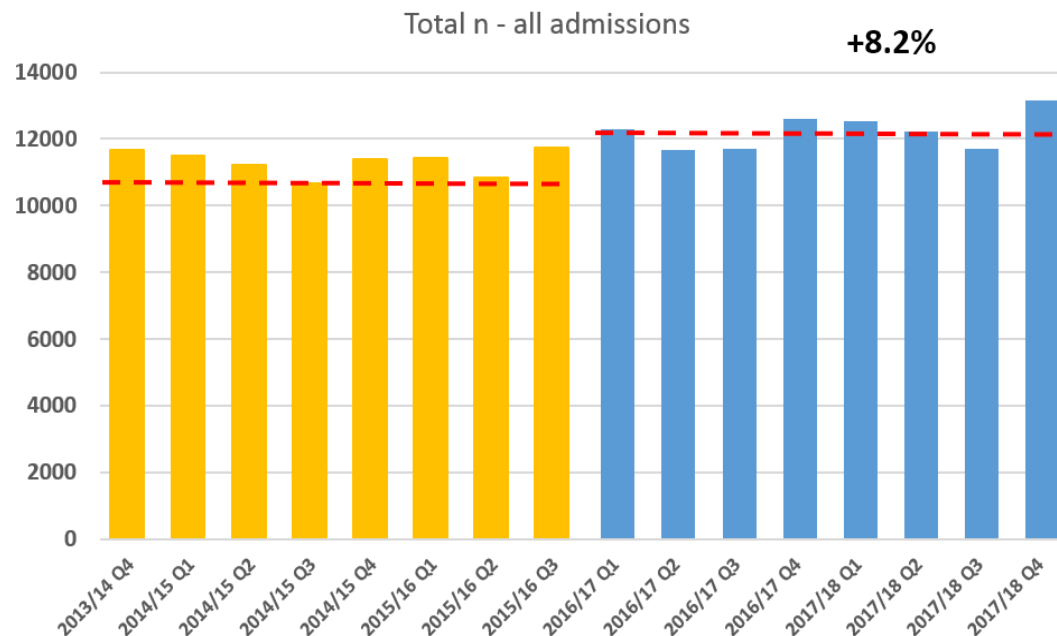


Score 5/10 or more

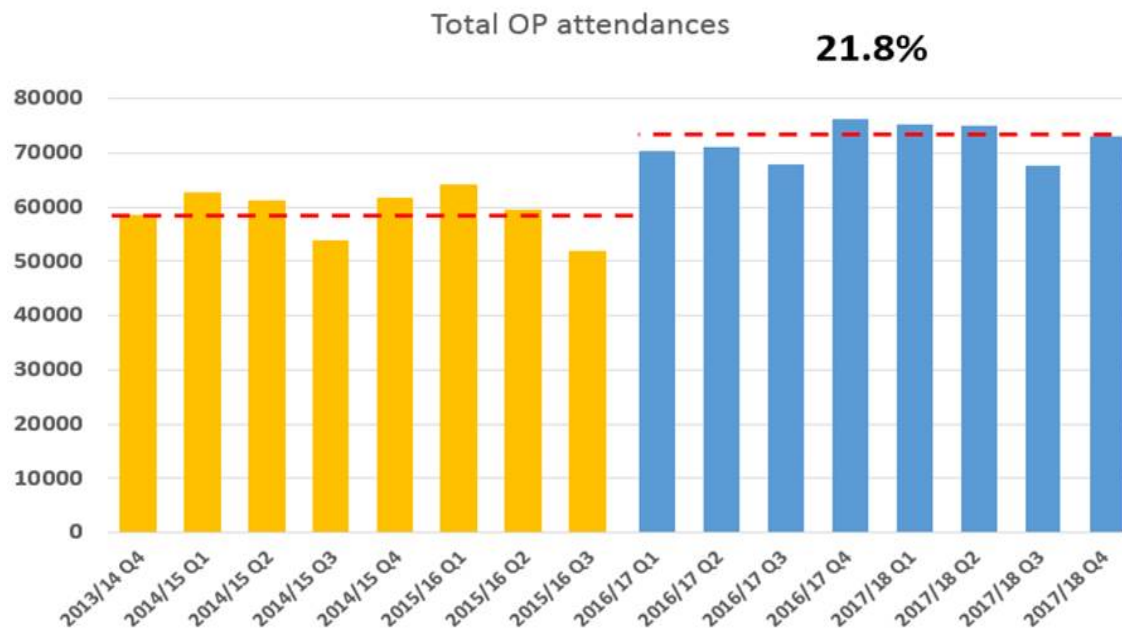


92% – All
93% – Nurses
92% – Allied Health
89% – Doctors
85% – Consultants
94% – Trainees

OPERATIONAL BENEFITS: EXAMPLES



Outpatients - all



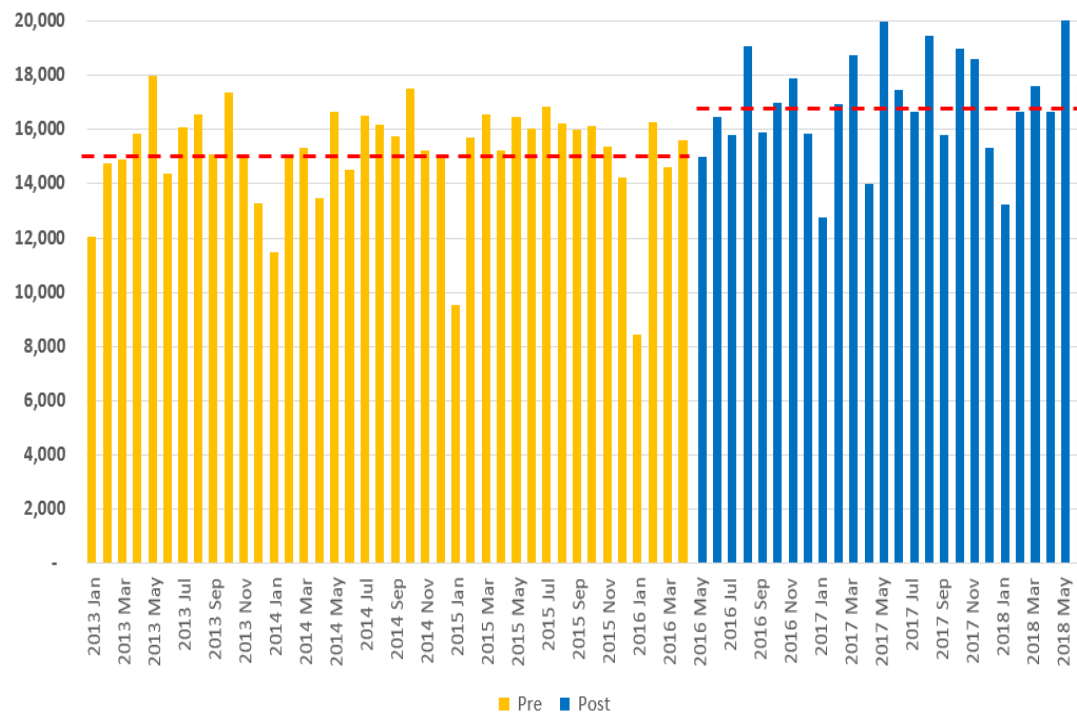
OUTPATIENT ATTENDANCES



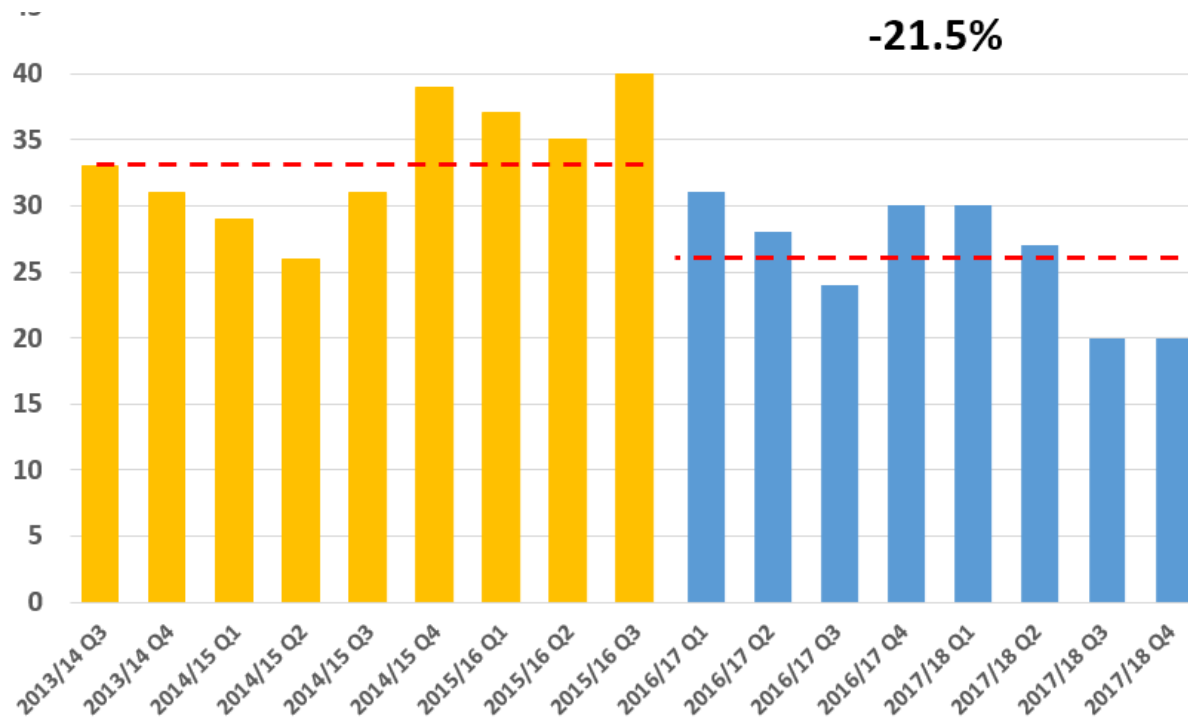
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Medical OP attendances

+11.7%



ED- WAIT TIMES

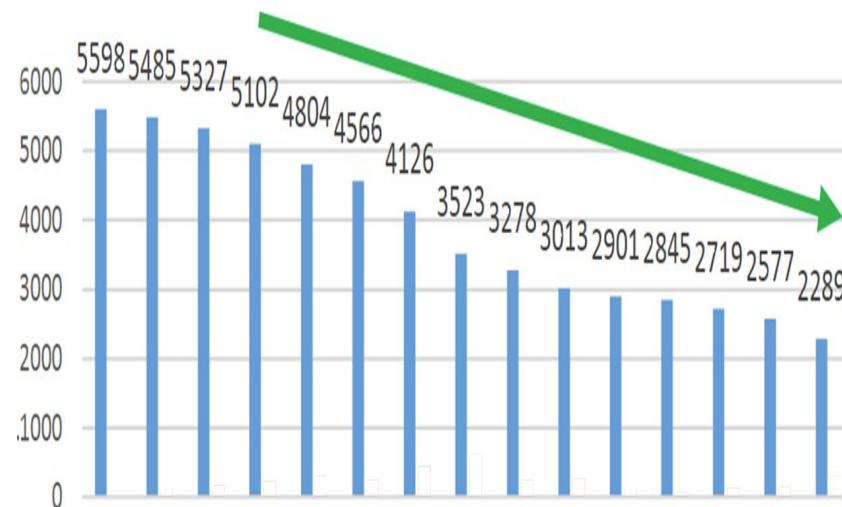


WAITLISTS



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Waitlist Management – Patients waiting over 365 days



TELE-HEALTH

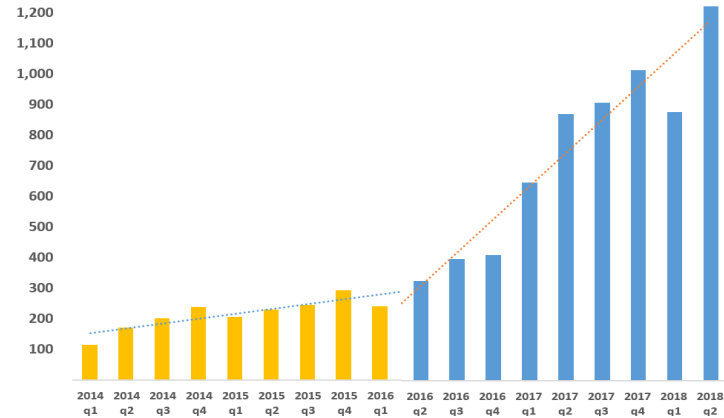
Service Growth

Please consider a Telehealth for future appointments
This patient is eligible for Medicare funded Telehealth

450%



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CLINICAL BENEFITS

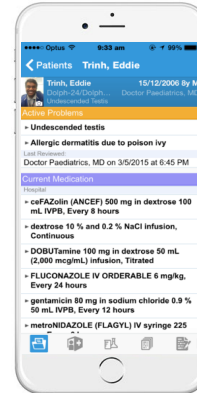
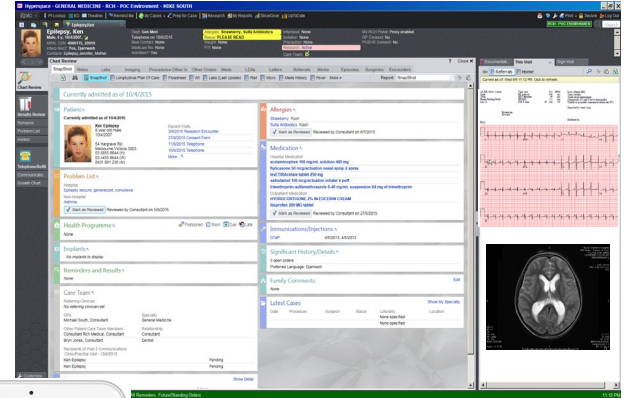
One system

All information in one place

- Clear overview of whole patient
- Easy to find
- Fast
- Available (100% uptime)
- Multiple concurrent users per patient
- Device integration

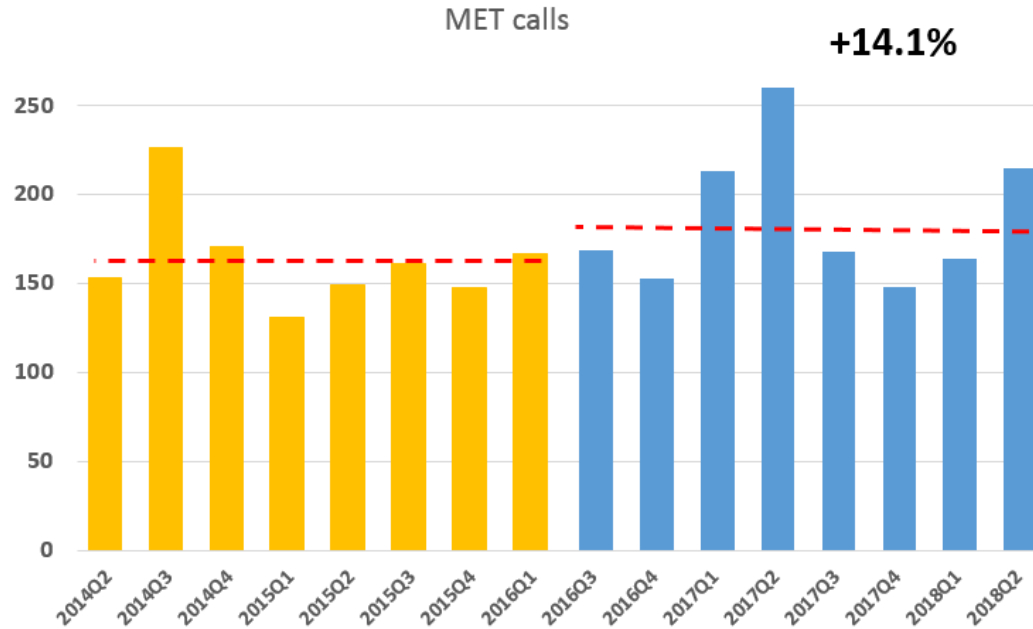
Remote access

Desktop / iPad / Smartphone





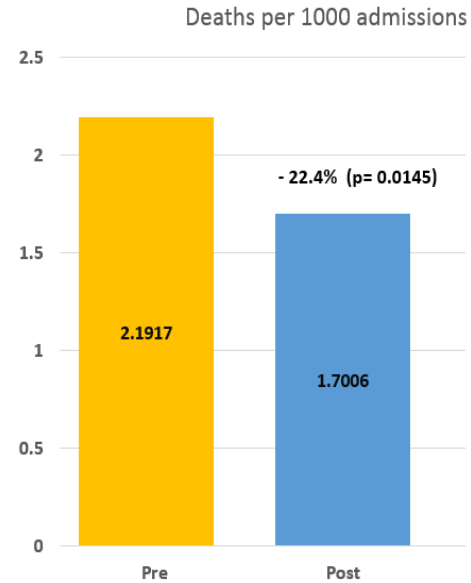
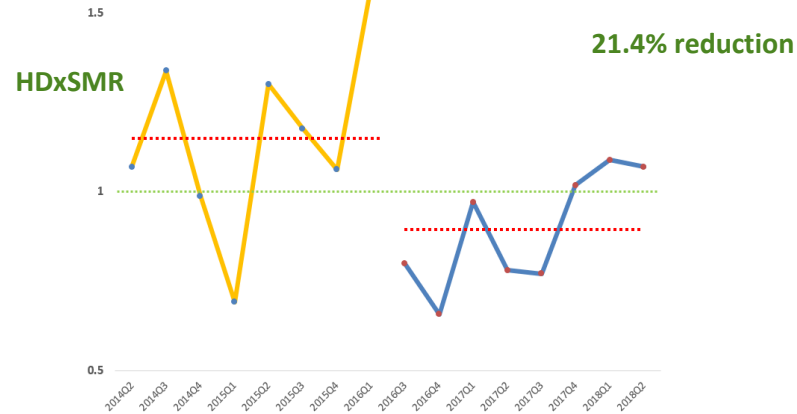
MEDICAL EMERGENCY TEAM CALLS





MORTALITY

Standardised Mortality Rate – Health Round Table HDxSMR





THE CANBERRA EXPERIENCE

Advantages

- PAS – reduce patient movement interface issues
- Beaker – integrated laboratory system
- Information pushed to you
- Secure chat –communications platform
- Spectralink devices - mobility



THE CANBERRA EXPERIENCE

What can you learn from our experience?

- It has been done many times before

“the best is the enemy of the good” *Voltaire*

- Trust your project team
- Trust in your vendor
- This will unify your hospitals with a common goal



THE CANBERRA EXPERIENCE

- Develop a philosophy of build
 - Simplicity for end user
 - Mobility
 - Communication, documentation, location, staff safety
 - National standards
 - Standardisation



THE CANBERRA EXPERIENCE

Change management

- Patient safety
- National standards
- Legislation
- Standardisation
- Evidence based



LESSONS LEARNED

- Framed as a CLINICAL project
- Clear message that clinicians will drive the whole project.
- Clinician engagement articulated.
- Clinical ownership.



LESSON LEARNED - GOVERNANCE

- Board Committed – subcommittee. Oversight without interference
- Top Executive Sponsorship (Deputy CEO & CEO)
- Strong & Connected Governance Structure
- Gateway reviews – external audit
- Benefits driven implementation
- At least a 10 year view
- Frank and honest discussions about limitations of current EMRs

Success Factors (Ernst & Young Audit)



1. Active, highly engaged and visible executive sponsorship
2. Consistent and active clinical engagement
3. Users must want the system from the beginning of the project
4. Set the project up right
5. A methodology that works
6. The right Program Director/Project Manager
7. Commitment and goodwill of the project team
8. A vendor committed to the outcome
9. Learn lessons from other sites and similarly complex projects
10. Relentless, detailed Go Live Readiness planning



Questions ?

Melbourne Children's

A world leader
in child and adolescent
health

