

Key Message #1: We are switching to electronic ordering in early 2024

We are scheduled to start using electronic ordering (Computerized Provider Order Entry, or CPOE) and a closed-loop medication system at Victoria General Hospital (VGH), Gorge Road Hospital and South Island Surgical Centre in mid-February 2024 and at Royal Jubilee Hospital (RJH) in mid-March 2024.

Approximately three dozen ambulatory/outpatient clinics with significant linkages to patients in acute care will go live alongside acute care services at that time. Remaining ambulatory clinics will follow later.

In preparation for electronic ordering, we have done a lot of work to update order sets so they reflect best practices, are more consistent Island-wide and remain adaptable to local contexts.

Key Message #2: CPOE is a major quality improvement change

Moving from paper orders to electronic orders improves the quality and safety of patient care. This is a significant change to medical and clinical practice requiring early and frequent medical staff engagement, dedicated education and Go-Live support.

Our learning and engagement strategy includes both online and in-person activities, as well as a dedicated engagement lab staffed by knowledgeable Provider Education and Experience (ProEX) colleagues.

Additionally, the IHealth team consists of a network of Medical Staff Specialty and Site Leads, Peer Mentors, Clinical Informatics, and 24/7 Go-Live support (on-site and remote) to help support Medical Staff and Learners during the activation.

Please contact us to further discuss CPOE and the associated changes at one of your team meetings. We would be glad to answer questions, provide quick demonstrations, or receive feedback at any time. The engagement lab at RJH is located in Royal Block 203 and the engagement lab at VGH is located in S275. Both labs are available for onsite drop-in IHealth support and demonstrations on Wednesdays from 1pm-3pm. For any inquiries related to the engagement lab, please email EHRProviderEducation@Islandhealth.ca

Key Message #3: Workflow Validation Sessions are critical in our preparation

The next major step in preparation for electronic ordering is a series of workflow validation sessions. During these 4-hour sessions, interdisciplinary workflows describing how we care for our patients are reviewed. These sessions can uncover gaps in our understanding and site-specific variances that inform the design and build of the electronic system and identify needed changes to our practice in order to successfully transition to electronic orders.

It is critical for Medical Staff representatives from across Island Health to participate in workflow validation sessions. We want to be sure that the electronic system we put in place supports Medical Staff, and does not introduce barriers for you or for our colleagues in other areas or departments.

Frequently Asked Questions (FAQs)

Q: What is the rationale for the sequential go-lives at VGH and RJH?

A: Island Health recognized that while VGH and RJH are tightly integrated and work within a single inpatient acute encounter, we needed to separate the go-lives by about four weeks. This acknowledges the significance of the change, the health human resource challenges and the change impact (i.e., reduction in some services during activation). This four-week period:

- Provides the opportunity for sites to support each other in patient service delivery (e.g., load levelling between Emergency Departments (EDs) or Surgical Services in support (such as peer mentors);
- Provides a better opportunity to have the appropriate number of supports (i.e., peer mentors, clinical and medical informatics);
- Allows for unique, complex and new services (i.e., critical care, neurology, cath lab, etc.) to stabilize at each tertiary site.

Q: What is the rationale for the partial Ambulatory Clinic go-lives?

A: Ambulatory clinics often go live in “waves” of clinics. For example, the Lower Mainland has used this approach to their ambulatory roll out.

- Typically, clinics that are tightly integrated with inpatient services go along with inpatient care.
- Support requirements also impact how many clinics can go live within a certain time period.

Q: Is training mandatory? Will I get paid?

A: Yes, CPOE training is mandatory. Yes, there is compensation for education (up to six hours) and Continuing Medical Education (CME) credits will be available.

Q: Will I be able to access IHealth remotely to enter orders?

A: Yes. Island Health is working on improving remote access and the multifactor authentication time outs.

Q: Is there an opportunity to leverage work done by other health systems that have implemented Cerner Electronic Health Records (EHR) successfully?

A: Yes! We are already collaborating with our Lower Mainland colleagues on policy alignment, processes, and system build. In addition, we are asking for their support during our activations.

- All the Clinical Informatics team have access to the Lower Mainland EHR and content.
- We participate in collaboration forums at the provincial and national level, as well.
- Our Medical Staff champions will have opportunities to visit sites that have gone live (Nanaimo Regional General Hospital (NRGH) or Lower Mainland). Examples: Palliative Care, Hospitalists and Anaesthesia have visited and/or worked at NRGH.