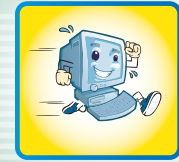




# CHECKPOINT



NEWS AND NOTES FROM THE SECOND LEG OF THE RACE TO MEANINGFUL USE OF ELECTRONIC HEALTH RECORDS (EHR) AT WATERBURY HOSPITAL

## How Are We Doing?

So, how is Waterbury Hospital doing in its efforts to transition to a meaningful use of Electronic Health Records (EHR)? You might say we're in the second leg of the race and quickly coming up on the third. Translating that to Cerner talk, **Colleen D'Amico, RN**, Project Leader of the Cerner Education and Communication Team, explains that the project is in the midst of the build phase, with the test phase coming within a couple of months. "Staff members on the Cerner team are all very excited and can see the fruits of their efforts now," says D'Amico. "They are working on solutions and how to interface together with the ultimate goal of an efficient workplace system for patient safety and care." "We are currently determining how many super users and trainers will be needed and working on developing the educational program," D'Amico says.

The hospital staff will have three phases of education, with each phase moving the user to a higher level of competency on the new Cerner system:

- **Classroom**
- **Train domain to practice what is taught in the classroom setting**
- **E-learning opportunities for reinforcement**

Providers will have mandatory classes and access to the Train domain for practice as well. They may also choose to take advantage of the e-learning opportunities that are available. The Education and Communication Team will utilize designated bulletin boards, fax communications to provider offices and Intranet access to be sure providers have everything they need to be prepared for the upcoming changes.

The training is scheduled to begin in the summer, with a phased approach, which would include the following groups:

- **Trainers**
- **Super Users**
- **End Users and Providers**

Along with training, communication is key. Internally, news and updates about the Cerner system are being communicated through this newsletter, e-mail, and bulletin boards, with updates on a regular basis and as changes occur. Cerner communication notebooks exist for each department involved with the Cerner project and contain any kind of communication from the team, minutes of meetings, project updates, advances and solutions. D'Amico says all Cerner-related bulletin boards and notebooks are standardized by the Education Subcommittee, so any staff member can refer to these communications from anywhere in the hospital.

*"Staff members on the Cerner team are all very excited and can see the fruits of their efforts now. They are working on solutions and how to interface together with the ultimate goal of an efficient workplace system for patient safety and care."*

- Colleen D'Amico, RN

*Project Leader,  
Cerner Education and Communication Team*

Patients and the public can learn more about the Cerner system through newsletters, posters and flyers placed in plastic inserts near the hospital patient elevators and entrances to the hospital. The Education and Communication Team continues to brainstorm new ways to inform the public about the organization's electronic health record and its emphasis on patient safety.

D'Amico says, "I don't think you can ever over-communicate, especially in today's ever changing electronic world!"



# Nursing Documentation Fine Tuned with Cerner

Nursing care can vary somewhat department to department. That's why the Cerner team includes a variety of nurses in different specialties to provide input and perspective on how the Cerner system is being built for Waterbury Hospital.

Three of the nurses who went on the January trip to Cerner in Kansas City

were able to provide input to help validate the system and make tweaks to its workflow documentation. **Dorinda Maurice**, with the hospital 24 years, works in critical care; **Ayanna Jordan** has been a med-surg nurse for 15 years and **Marlene Lorusso** works in the Family Birthing Center and has been a nurse for 31 years.

All agree that electronic charting and documentation will be better for patient care and work flow. The differences come in the workflow of the various departments, so some of the focus of the Cerner team has been on learning the needs of other departments, working together to incorporate ideas and finding common ground in creating a system that will be efficient for all. They worked with test scripts for each area of workflow, simulating a day in the life of a patient. This allowed them to look at everything from initiating a doctor's orders to utilizing bedside medical device integration.

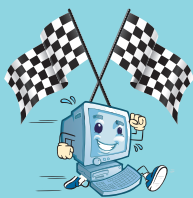
Ayanna explains, "Documentation will be streamlined. The Cerner system will ensure that nurses are compliant with the plan of care for a patient. Certain words and screens will trigger and remind the nurse to initiate and implement steps in the plan of care."

*"With the touch of a button, we will be able to do all our charting," says Dorinda, "and decrease the amount of duplication in charting"*

Marlene appreciates the consolidation of information that Cerner applications will offer. "IVIEW will provide a clinical view and documentation in one snapshot," she says. "We will be able to get a lot of information from one screen, rather than multiple forms."

"With the touch of a button, we will be able to do all our charting," says Dorinda, "and decrease the amount of duplication in charting." Another advantage is that documentation from various disciplines, such as physical therapy, occupational therapy and radiology, will all be centralized in the chart. Dorinda further explains that documentation with the Cerner system will facilitate more compliance with the Joint Commission for Accreditation of Health Care Organizations.

"Working with each department has been an eye opening experience and it has made the group (Cerner team) more cohesive. We gel well," says Dorinda. The three nurses agree that all this legwork will pay off when nursing documentation changes and other solutions go live in late September. It will also help to encourage and maintain the good working relationships across departments that already exist.



## An Update...

FROM THE WATERBURY HOSPITAL CERNER TEAM

## Go Live: September 26

Five months and counting! The Go Live date for nursing documentation, computerized provider order entry (CPOE) for Emergency Department physicians, and most other Cerner system solutions is planned for September 26. CPOE for all other providers will go live about 6 weeks later.

Betsy reports that the Cerner team has been working through the phase of system validation. With increased staff involvement, teams were purposefully set up to examine how the Cerner system would be integrated into day-to-day clinical care. About 75 people are on the hospital's Cerner team including providers, nurses, unit secretaries and ancillary clinical personnel from the lab, radiology, dietary and various therapies.

Cerner associates worked with the Waterbury Hospital teams the week of March 21st in an event called "Trainer Conversion Prep" where the Waterbury team members demonstrated back to Cerner their familiarity moving around the system in preparation for training general staff end-users. The team's last visit to Cerner in Kansas City will be in May.



## WE'RE PICKING UP STEAM!

The Cerner Project mascot, DATA, has moved to our second Milestone on the banner hanging in the cafeteria! The Cerner Clinical Transformation Project has progressed from the formation of teams and establishment of their goals and timelines to what we are calling the Build Phase. During this phase, Cerner is building each solution. This very important milestone, or "mountain," will be the foundation for every process we create and implement. It is also important to identify how the solutions will interact with each other to help achieve an optimum environment to ensure patient safety. Our motto for this phase of the project is "We're Picking Up Steam!"...and we are!

## CHECKPOINT

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