Post Secondary Partners in Connect Care

April 3 & 5, 2019 Edmonton & Calgary events







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Connect Care

What are "Connect Care", "CIS" and "Epic"?





What are Connect Care, CIS & Epic?



← overarching initiative

Clinical Information System ← Technology



← chosen vendor / software

Vision:

Better Health, Powered By Information

Mission:

To deliver best care and improve health outcomes for and with Albertans through an accessible, integrated, comprehensive and standardized clinical information system.



Reach

POPULATION

86,900 AHS

8,800 Covenant8,000 Physicians10,000 Students

2,100 Carewest / Capital Care / CLS

BEDS

8,940 Total Hospital Acute and Sub-Acute Care

25,323 Total Continuing Care

2,659 Total Addiction and Mental Health

FACILITIES

Community Ambulatory Care

6 Urgent Care Centres7 Ambulatory Care Centres

3 Family Care Clinics

139 Public Health Centres

Addition and Mental Health

39 Addiction

26 Community Mental Health

5 Standalone Psychiatric

Acute Care

106 Total Designated Hospitals

Cancer Care

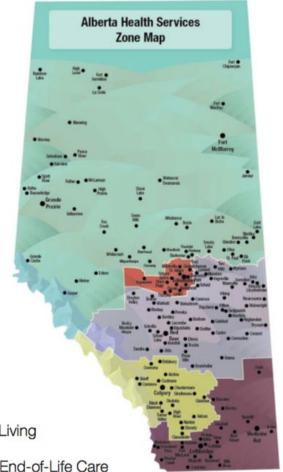
17 Cancer Centres

Community-Based Care

331 Long-Term Care and Supportive Living

108 Additional Contracted Care Sites

20 Community Hospice, Palliative & End-of-Life Care



Functions

The CIS will improve upon the functionality we have today, plus what has been missing

- Order management
- Results management
- Clinical assessment & documentation
- Clinical decision support
- Health information management
- Research management

- Medication management
- Personal health
- Embedded inquiry & analytics
- Population health management
- Clinical operations support
- Corporate administration
- Virtual Health Services

Epic Community

International

 Australia, Canada, Denmark, Finland, Lebanon, Netherlands, Saudi Arabia, Singapore, UAE, United Kingdom

SickKids St. Joseph's Healthcare Hamilton Mackenzie Health Children's Hospital of Eastern Ontario Cleveland Clinic



When does Connect Care Happen?





Connect Care: Implementation Timeline



EDMONTON ZONE

WALTER C. MACKENZIE CAMPUS

Aberhart Centre; Clinical Sciences Building; Kave Edmonton Clinic: Mazankowski Alberta Heart Institute; Stollery Children's Hospital; TB Central Services; University of Alberta Hospital; Zeidler Centre

East Edmonton Health Centre:

eCLINICIAN Transition

Ambulatory clinics

PORTALS

Connect Care Patient Portal: Connect Care Provider Portal

PHARMACY & DI

Sites in: Urban and Suburban Edmonton

ALBERTA PUBLIC LABS

Sites in: Edmonton; All Edmonton Pathology; All DynaLIFE in Alberta; Cross Cancer Institute

APRIL

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AVE

Foothills Medical Centre (including associated clinics at Richmond Road Diagnostic & Treatment Centre)

CANCER CENTRES

CALGARY ZONE

Tom Baker, Holy Cross; Bow Valley; High River; Richmond Road Diagostic & Treatment Centre

CANCERCONTROL ALBERTA South

SOUTH ZONE

Acute and combined acute and long term care sites encompassing the former Chinook and Palliser Health Regions

CENTRAL ZONE

Acute and combined acute and long term care sites encompassing the former East Central Health Region

PHARMACY & DI Sites in: Calgary: Rural

ALBERTA PUBLIC LABS

Sites in: former East Central, former Chinook,

m PREPARATION FOR

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IMPLEMENTATION | Standalone sites for: Addiction & Mental Health; Community Care; Continuing Care

(Intake/Transition); Community Palliative: Geriatrics: Home Care: Supportive Living: Standalone Long Term Care; Public Health

CALGARY ZONE CENTRAL ZONE, EDMONTON ZONE, NORTH ZONE. SOUTH ZONE Addiction & Mental Health: Community Care; Continuing Care (Intake/Transition): Community Palliative; Geriatrics; Home Care; Supportive Living: Standalone Long Term Care; Public Health

PROVINCAL Corrections and Remand

PHARMACY

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Addiction & Mental Health; Community Care; Continuing Care (Intake/Transition); Community Palliative; Geriatrics; Home Care: Supportive Living; Standalone Long Term Care;

Public Health







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CALGARY ZONE

Rural Acute Care: Long Term Care - Combined Sites; Calgary TB Clinic

URGENT CARE

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Sheldon M. Chumir Health Centre: South Calgary; Airdrie; Okotoks; Cochrane

NORTH ZONE

New Grande Prairie Regional Hospital (Subject to opening dates)

CENTRAL ZONE

Acute and combined acute and long term care sites encompassing the former David Thompson Heath Region including the Centennial Centre for Mental Health and Brain Injury and Sylvan Lake Advanced Ambulatory Care Service

PHARMACY & DI

Sites in: Calgary including Central Production Pharmacy; Rural

ALBERTA PUBLIC LABS

Sites in: former David Thompson

CALGARY ZONE

Alberta Children's Hospital; Peter Lougheed Centre; University of Calgary Teaching Clinics

NORTH ZONE

Acute and combined acute and long term care sites encompassing the former Peace Country Health Region; Fort Vermillion; High Level; La Crete

EDMONTON ZONE

Royal Alexandra Hospital; Glenrose Rehabilitation Hospital; Lois Hole Hospital for Women

CANCER CENTERS

Cross Cancer Institute CANCERCONTROL ALBERTA

North

EDMONTON ZONE

Suburban acute and

term care sites

Combined acute and long

PHARMACY, ALBERTA

Sites in: Suburban Edmonton

PUBLIC LABS & DI

PHARMACY & DI

Sites in: Edmonton; Calgary; Rural; CancerControl

ALBERTA PUBLIC LABS

Sites in: former Peace Country: Genetics Services South Lab; Royal Alexandra Hospital

CALGARY ZONE

Rockyview General Hospital: South Health Campus Hospital

NORTH ZONE

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Acute and combined acute and long term care sites encompassing the former Aspen and Northern Lights Health Regions

EDMONTON ZONE

Alberta Hospital Edmonton; Grey Nuns Hospital: Misericordia Community Hospital

PHARMACY & DI

Sites in: Edmonton; Calgary incuding Outpatient MRI at South Calgary Health Centre; Rural; (includes Corrections)

ALBERTA PUBLIC LABS

Sites in: Urban and Suburban Calgary, Edmonton; former Aspen; Provincial Lab EDMONTON ZONE, NORTH ZONE, SOUTH ZONE

Addiction & Mental Health: Community Care; Continuing Care (Intake/Transition); Community Palliative; Geriatrics; Home Care; Supportive Living; Standalone Long Term Care; Public Health

PHARMACY

Addiction & Mental Health; Community Care; Continuing Care (Intake/Transition); Community Palliative; Geriatrics; Home Care; Supportive Living; Standalone Long Term Care: Public Health



Connect Care

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Where we are now - program

Build
Completed
Robust
testing
process
continues

Recruiting trainers & Super Users.
Resource / curriculum finalizing.
Training Scheduling

Training

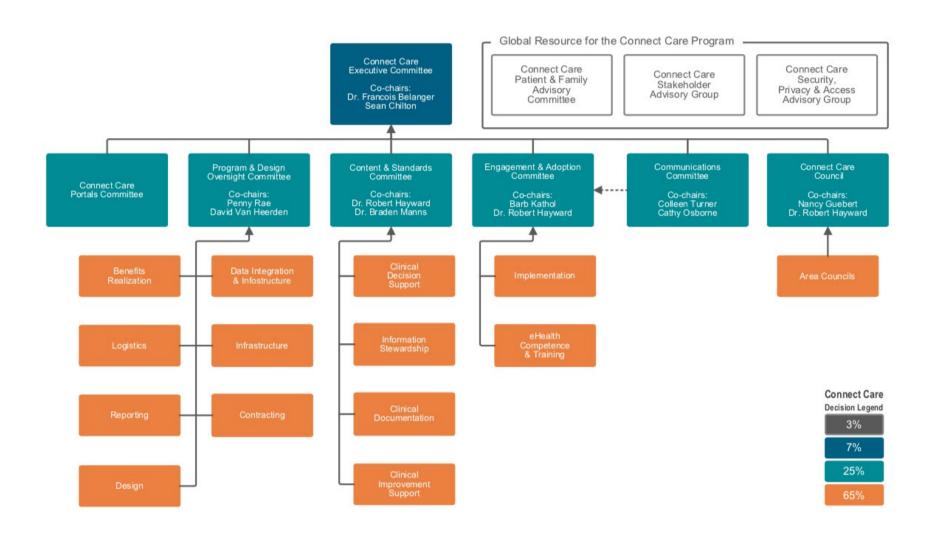
Readiness
Guiding
our people
through
change

Who Oversees Connect Care?





Oversight → Committees, Councils, Groups



Community



Advisory Groups

- Consultative and advisory resource to entire initiative
- Connection and liaison with provincial initiatives
- Facilitate alignment of Connect Care governance and advocacy with stakeholder needs and interests
- Enhance awareness and accountability

Questions?





Connect Care Training





Key elements

- ~200 unique Connect Care roles
 - eLearning modules
 - Instructor led courses
 - End User Proficiency Assessment (EUPA)
 - AHS IT Privacy elearning InfoCare: On Our Best Behavior
- Proficiency Assessment triggers system access
- 'Credentialed Trainers' facilitate learning
 - Opportunity for post secondary schools to have 'Credentialed Trainers' embedded

Examples

Role	eLearning time	Instructor Led time
Allied Health Therapists (OT/PT/SLP)	1 hour	7.75 hours
Unit Clerk	0.5 hours	7.75 hours
Dietician	1 hour	7.75 hours
ECG Technician	1 hour	11.25 hours
Nursing		
- Ambulatory	1.5 hours	7.75 hours
- ER / general inpatient roles	3 hours	11.25 hours
- ICU / Surg	3.5 hours	15.5 hours

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eHealth Competence

- the skills, knowledge and attitudes required to use digital health tools for useful information gathering and problem solving.
- involves being able to appropriately find, understand and evaluate information from digital health tools, and to contribute to information that is accessed and shared between care providers who use these tools.
- AHS has tools & support resources to assess and assist in approving competency

Academic Use vs. End User training

Academic Use

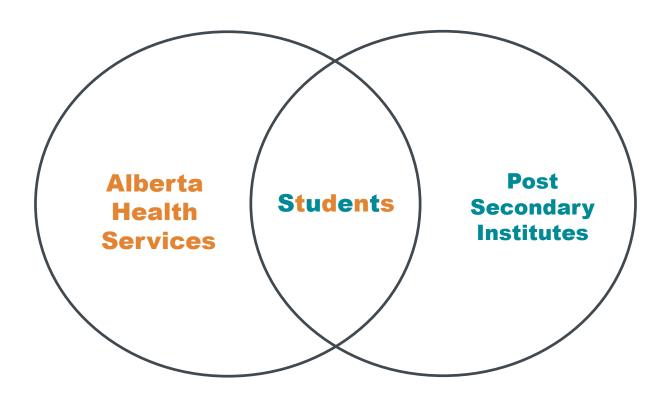
- CIS integrated into standard program curriculum
- Intention for students to learn generally about electronic health records / CIS... what they are and how used in healthcare organizations
- Learning is not directly linked to hands on use of the system in a live environment

End User training (for practicums)

- Students are in a supervised work placement in a health care facility performing hands-on patient care using
- Equivalent to 'end user training' similar to staff
- Training is for direct use of the system based on the role / workflows they'll be performing in their placement.

Shared Accountability

What does this look like?



We need your help...

By answering these 5 questions:

- 1) Discuss what 'shared accountability' between AHS and your organization for training academic learners in Connect Care means to you.
- 2) Discuss the vision of providing Connect Care training at the academic institution by institution staff. What opportunities and challenges does this present?
- 3) What actions & strategies would enable your organization to transition to this future state?
 - a) In the short term (1 year)?
 - b) In the long term (3 years)?
- 4) What models do you envision for student practicum preparation in Connect Care?
 - a) What specific supports would your organization require from AHS to achieve these models?
- 5) What is one question that has been left unanswered?

Discussion:



de Bono's "6 Thinking Hats"





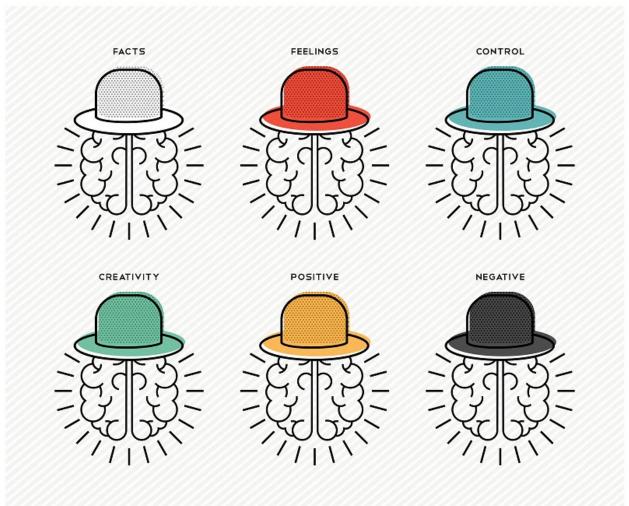
What is "6 Thinking Hats"

de Bono's Six Thinking Hats **technique** is a model that can be used for exploring different perspectives towards a complex situation or challenge. In our case, Connect Care training for students coming for practicum placements at AHS.

"Seeing things in various ways is often a good idea in strategy formation or complex decision-making processes"

Let's call it directed "brainstorming"

Put your de Bono "thinking hats" on



Pick one of:



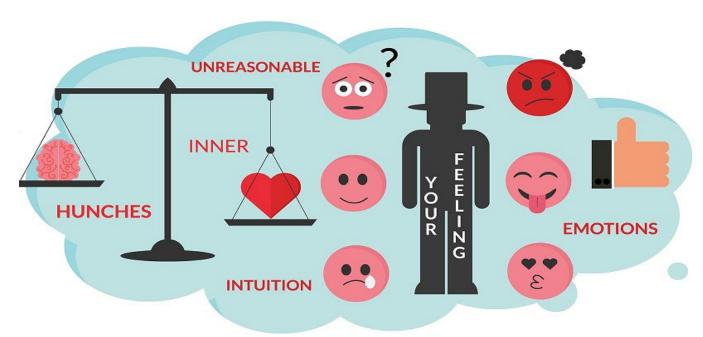
YELLOW HAT THINKING

focuses on benefits

Yellow hats bask in sunlight – they should think positively looking for the value in every possibility. What benefits does it bring?



Pick one of:

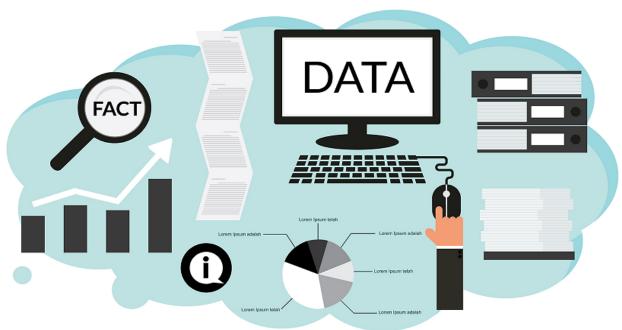


RED HAT THINKING

focuses on feelings

Red hats are the emotional input of the discussion. They allow themselves to be intuitive and act as much on hunches as fact. They are sensitive to the emotional responses of others in the group.



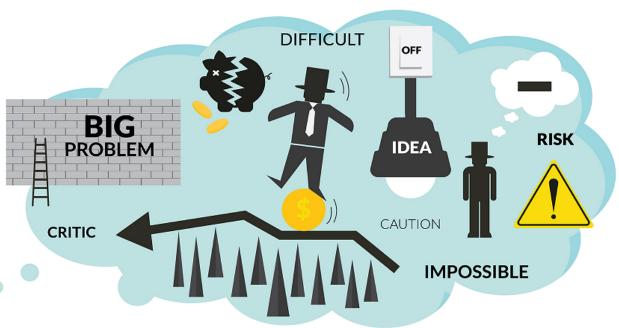




WHITE HAT THINKING

focuses on fact

White hats concentrate on the facts – what information and knowledge do you know about the situation? What can you learn about the situation from this information? What information is missing? What can you learn from past trends?

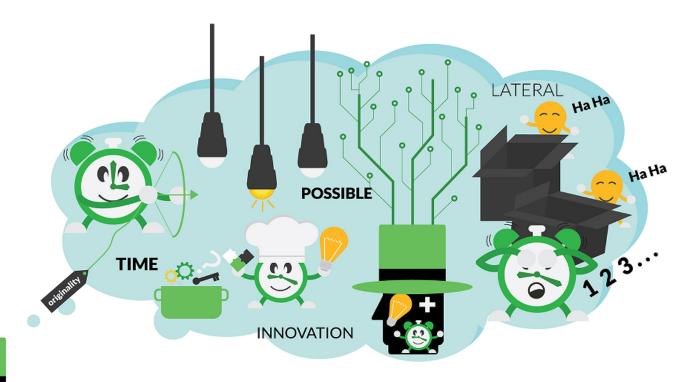




BLACK HAT THINKING

focuses on negative

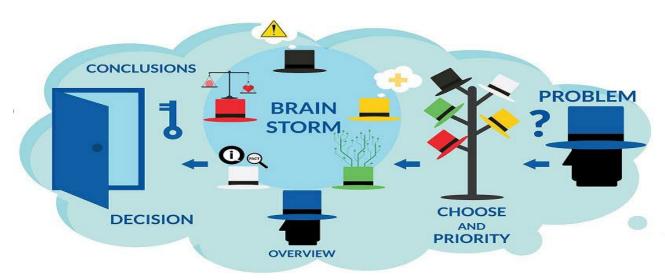
Black hats live under a black cloud! They should think pessimistically. Look for flaws in the plan, find the obstacles.





focuses on originality & innovation

Green hats think creatively in a nocriticism, freeform thinking kind of way.



BLUE HAT THINKING

focuses on management the thinking process

Blue hats concentrate on process, calling on the other hats to add in their thinking as and when it's appropriate and making sure each option is scrutinized from all perspectives. They are neutral.



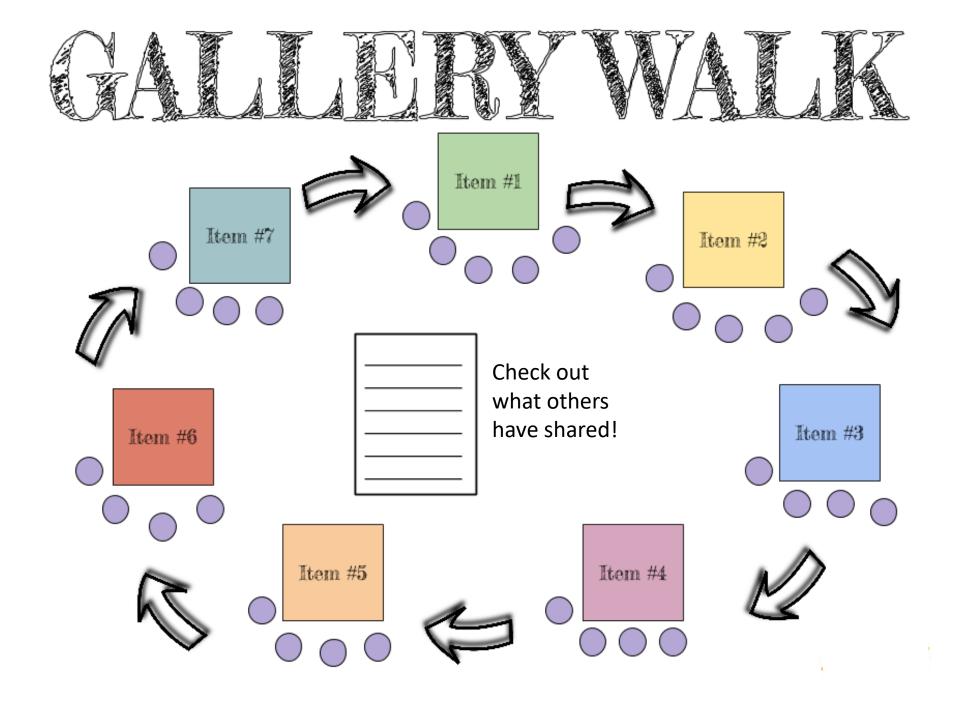
Ground Rules

- Everyone has an equal voice, regardless of position or title.
- Everyone has permission to speak openly and honestly.
- Commit to participating, everyone is accountable to make the activities a success.
- All ideas and differences of opinion are welcomed. We need to communicate these differences respectfully.
- Use 'common language'/avoid the use of acronyms.
- Facilitators will interrupt and/or redirect discussions to keep on topic and within timelines.
 - Remember you are wearing the blue hat and managing the thinking process

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