

Electronic Medication Management (EMM) NSW Therapeutic Advisory Group Update May 2017

Towards an Integrated Digital Patient Record

While the work on the current eMR Connect Program scope continues, there is work also focusing on the priority areas for the next couple of years. Funding has been committed towards achieving a fully integrated digital patient records for NSW. The focus will be on achieving a fully integrated Digital Patient Record and will include:

- Building on the established foundations and extending capabilities of the eMR
 - Core clinical documentation across all in-scope hospitals. This investment will build on the established eMR foundation, extending its capabilities to deliver core clinical documentation, including clinical progress notes and diagnostic orders across all in-scope sites.
 - Accelerating the eMeds rollout, investment has been committed to expanding and accelerating the accelerated rollout of eMeds to more NSW public hospitals (an increase from 28 to 58 sites).
- Focusing on standardisation
 - Creating a consistent eMR foundation across NSW
 - Support for change management and the optimisation of the system
- Supporting clinicians to optimise their use of the eMR
- Point-of-care scanning for the eMR
 - Review existing eMR functionality scanning capabilities
- Supporting LHDs to achieve a consistent scanning capability across NSW
- Data analytics
 - Delivering the benefits for quality clinical care and improved patient outcomes
- Security Auditing
 - Developing a security and privacy auditing solution with proactive monitoring, and detailed statistical and analytical reports.

The eMR Connect Program Scoreboard (at May 2017)

<i>eMR2</i>		<i>Community</i>		<i>eMeds</i>	
Live	Scope	Live	Scope	Live	Scope
145	179	333	333	13	58

LHD Site Activities

- **Hunter New England Local Health District –**
Implementation of MedChart continues across John Hunter Hospital (JHH) with positive feedback provided from clinical staff. The MedChart team have been providing fantastic support to staff through in-services, as well as phone support. JHH Maternity & Gynaecology (K2, K3 and Delivery Suite) go-live were completed with no setbacks. John Hunter Children's Hospital go-live occurred on the 4th April, and no were problems reported. Denman Multi-Purpose Service (MPS) implementation began on the 20th March, and was completed successfully. There are plans to continue with Merriwa MPS MedChart implementation in early May. MedChart enrolments, training and account creations all continue to increase; there are currently at 4600 users, 38 wards, with 616 beds live using MedChart.

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Electronic Medication Management

- **Sydney Local Health District –**

The Health Informatics Team continues to optimise eMeds and improve the end user experience for all staff. Enhancements include the revised VTE PowerPlan and enhanced prescribing and administration alerts for hydromorphone. A district review of nursing workflows for insulin administration and BGL recordings has been completed in preparation for the eMR2 implementation in June at Concord hospital

February saw the successful implementation of STP 3.5 code upgrade package which has almost completely eradicated the pending complete issue for continuous IV fluid orders (to < 1% of all orders).

State user acceptance testing for the Glucose Management MPage is now complete and the general feedback has been positive.

Facility wide user acceptance testing for RPA eMeds will commence in the upcoming weeks, this will also form part of the engagement process for the facility. Go-live planning is underway for eMeds at RPA, who will be adopting an encounter based rollout. Recruitment to key 'business as usual' (BAU) roles is progressing with the eMeds pharmacist and the Nurse Manager Informatics at Canterbury hospital recently appointed.

- **The Sydney Children's Hospital Network –**

The eMM team at The Children's Hospital at Westmead is heavily focused on testing an upgraded version of Cerner Millennium (2015.01.17), ensuring that all clinical workflows are thoroughly tested. This code upgrade is an important step towards further enhancing the eMR and implementing new, beneficial functionality, particularly for pharmacists. The eMM team has identified a number of issues with the new code level relating to nursing and pharmacy workflows and is working with Cerner towards developing code corrections for these issues. It is planned for CHW to 'go live' with the new code level in the second half of 2017.

In addition to the code upgrade project, the eMM team continues to work on developing a series of PowerPlans (order sets) to support appropriate antimicrobial prescribing for a wide range of conditions, also incorporating orders for appropriate laboratory and imaging investigations. The team has recently implemented PowerPlans to support streamlined, standardised management of patients with febrile neutropenia and suspected sepsis, analgesia in the acute emergency setting as well as medications administered in the ambulatory setting within Psychological Medicine. With the commencement of the SurgiNet Anaesthesia project in April 2017, the team has participated in design discussions with a focus on building medications within the Anaesthesia eMR solution.

- **North Sydney and Central Coast Local Health Districts –**

Unit testing will successfully complete this week, allowing the project team to start focusing on system testing in the weeks ahead. The Change team are stepping-up stakeholder engagement and are starting to schedule eMeds demonstrations. This is especially important there has been a revision recently to the go-live schedule, so that Ryde Hospital will now be the first live site; planned for early December 2017.