



## **CIO/CMIO In Person Meeting**

Wednesday, December 4, 2019; 4:00-6:00 San Diego, CA

# **2019 in Review**Arrowhead Regional Medical Center

- Regulatory and QI Improvement:
  - ✓ Promoting Interoperability Meaningful Use
  - ✓ Electronic Clinical Quality Measures (eCQM) reporting
  - ✓ Number of cancer registry and interfaces
- Analytics:
  - ✓ IBM Watson/Truven Care Discovery Quality Measure (CDQM)
- Improved discharged process for homeless patients
- CPOE and Electronic documentation improvement
- Number of accomplishment in our security (Mobile device management, Security awareness, Endpoint protection, SSO)

# 2020 Plans Arrowhead Regional Medical Center

- Epic implementation 2020-2021
- GME partnership/education Clinical Informatics Rotation
- Cloud security
- User behavior analytics
- Security awareness
- Staff training

# **2019 in Review**Ventura County

- SB 1152 Homeless discharge process documentation January 2019
- Data Warehouse development January 2019-ongoing
- CA Parkinson's Registry March 2019
- EPCS Implementation April 2019: Cerner Opioid content implementation driving naloxone Rx 7% to 26%.
- CA Cancer Registry June 2019
- Health Maintenance Overhaul June 2019
- 2015 CEHRT July 2019
- Patient Portal Expansion- Labs/Radiology
- Tonic (pre-visit questionnaires) August 2019-ongoing
- Outpatient Quest Lab partnership September 2019 Ongoing rollout
- 2018 Cerner code upgrade October 2019
- CareSelect AUC (Advanced Imaging Radiology Decision Support) implementation October 2019
- CommonWell HIE December 2019
- Dragon Medical One Dictation December 2019

# **2020 Plans**Ventura County

- Create HCA WiFi access policy, Create VCHCA Certified Device Policy and implement infrastructure upgrades (laptops, desktops, WiFi optimizations): 1st quarter 2020
- Manifest Medex (HIE) 1st quarter 2020 to implement ADT, C-CDA interface to follow
- Imprivata Single Sign On upgrade January, 2020
- E Clipboard (pre-visit questionnaires in Portal) implemented but not pushed out to users, hoping to start trial with Pediatrics.
- Referral Management Optimization
- PDMP Integration
- Expand Use Cerner Advance/Lights On to target ongoing training needs and monitor effects

# 2020 Plans Ventura County

- HealtheAnalytics/HealtheRegistries/Cerner Care Management Implementations
- Data Governance development and Physician Leadership Team/Informatics Resource Council charter (New procedures/platform for increased transparency and accountability, improved evaluation of Change Management requests for fixes/features based on cost/impact/strategy.)
- Uplift of training/onboarding procedures for providers, nursing (Build training database, HCA supported website, then migrate/consolidate existing training content and initiate training Onboarding/Maintenance/ Refresher roadmap)
- PRIME/QIP and other Quality Metric support
- New Cerner feature evaluations: Chart Assist? Charge Assist? Chart Search, Auto-text sharing, ED LaunchPoint
- Nursing documentation uplift, Dynamic Documentation upgrades
- Cerner Acute Workflow, Quick Visits, Care Pathways development.

# 2019 in Review CSCHS (prev SCVMC)

- Completed PRIME DY14 Submission; Completed QIP/EPP PY2 Submission
- Acquired two hospitals out of bankruptcy: O'Connor Hospital (OCH) and St. Louise Regional Hospital (SLR), as well as DePaul Urgent Care Center
- Brought OCH, SLR and DePaul up on SCVMC Epic 8/17/2019, with some local specificity
  - HAPPI team, Physician Builders big contributors to success
- Completed extensive pilot of Epic SecureChat, and are moving to replace pagers with cell-phones running Rover/Haiku and SecureChat
- Delayed launch of telemedicine
- Licensed Epic's cloud-based Cognitive Computing Platform
- Moved to triennial Epic Upgrades; most recently 5/2019 in November; next is February

## 2020 Plans CSCHS (prev SCVMC)

- Launching dedicated provider support group
  - Letting HAPPI revert to provider optimization
- Finally achieving "working closely with Health Plans" on value-based care programs
- Replacing pagers with cell phones running Rover/Haiku and SecureChat
- Launching telemedicine: Vidyo, InTouch, etc.
- Bringing all 3 Medical Staff Offices up on common platform and interfacing that platform back to our Epic System to better maintain provider information
- Re-launching Slicer-Dicer for chiefs/chairs, and for physicians who want to see info on "My Patients"; operating a clinical analytics consult service
- Collaborating to launch a Data Sciences education program for CSCHS physicianbuilders and analysts
- Better understand and launch additional predictive models
- Big Epic Upgrade for us is May 2020: Storyboard, Bones, Dialysis ...

## 2019 in Review

## Riverside University Heath System

#### 1. Growth

- 1. New FQHCs
- 2. eConsults
- 3. Cathlab
- 4. Correction TeleHealth
- 5. Epic Bones for Ortho
- 6. CathLab
- 7. BHI

#### 2. Quality

- 1. UDS
- 2. Health Plan P4P automation of quality code drop

# 2019 in Review Riverside University Heath System

### 3. Population Health Management

- 1. Healthy Planet Registries
- Automated Text Reminders
- 3. Self management goals in Epic
- 4. Whole Person Health Score

#### 4. Data

- 1. Tableau
- 2. SAS for WPC

### 2020 Plans

## Riverside University Heath System

#### 1. Growth

- 1. New 200,000sqft Medical Surgical Center
- FQHC telehealth
- 3. MC to Jail Telehealth
- 4. eFax

### 2. Quality

- 1. Attributed Roster with P4P performance
- 2. MCAS coordination w/Health Plan

### 3. Population Health Management

- 1. Healthy Planet Registries -expansion
- 2. Patient Outreach

#### 4. Data

- 1. Epic Clarity extension
- 2. SAS for other areas

# 2019 in Review LA County Department of Health Services

- Enterprise IT Workforce Assessment & Realignment
- Enterprise Information Security Assessment
- Enterprise Data Maturity Assessment
- Department Strategic Plan & IT Strategic Plan
- EHR Code Upgrade (Cerner Millennium) & 5 Year Anniversary
- Time & Scheduling Planning and Negotiations
- Cost Accounting RFP
- IS Governance Redesign
- Data Center Consolidation and Application Rationalization
- Windows 10 and Security Patching Progress

# 2020 Plans LA County Department of Health Services

- Continue Progress with 2019 Accomplishments & Strategic Plan
- Population Health Management/Value Based Care
  - Pop Health Platform Optimization
  - Nurse Advice Line & Manage OON Patients
  - Cost Accounting System & CDI & Data Integrity tools
  - Telehealth, Self-Scheduling, & Automated Appointment Reminders
- Quality and Patient Experience
  - Standard PC & Special Scheduling Templates
  - Improve Access & Care at DHS Medical Hubs
  - Meet PRIME and QIP Requirements
- Workforce Optimization
  - Patient Acuity Scheduling, Modernize & Optimize Hiring, etc.
- Fiscal Sustainability
  - Cost Optimization Initiatives, Shift from Federal Waiver to Managed Care, etc.

# 2019 in Review Contra Costa Health Services

- Strategic Planning: Envision Health
  - Profound Metrics, View of System, Purpose and Community Engagement
- Formation of Office of Informatics and Technology
  - Informatics, Analytics and Innovation
- Waiver Programs: PRIME, QIP, WPC and GPP
  - Launched ride-share NMT service
  - Formed Outreach Task Force
- Detention Redesign
- Epic Refuel Assessment
- Epic double upgrade

May 2019 version

# 2020 Plans Contra Costa Health Services

- CalAIM Planning
  - Develop and expand partnerships, system alignment
- Expand Innovation Program
- Revamp IT Governance
  - Release cycles
- Quarterly Epic Upgrades



### **Go-Live Highlights**

AHS went live on Epic at 5:51 a.m. on Saturday, September 28, 2019

AHS joins more than 400 other health systems and ~60% of California patients using Epic's EHR



### **Epic Modules Live for AHS**

- 1. Beaker (Lab)
- Cupid (Cardiology)
- 3. Radiant (Radiology)
- 4. Long Term Care
- 5. Willow IP (Rx)
- 6. Willow Amb (Rx)
- 7. ASAP (ED)
- 8. Care Everywhere
- 9. EpicCare Link
- 10. EpicCare Inpatient
- 11. EpicCare Ambulatory
- 12. Healthy Planet
- 13. Behavioral Health
- 14. Bones (Ortho)
- 15. Caboodle & Cogito (Analytics Suite)
- 16. Cadence (Scheduling)

- 17. Grand Central (ADT)
- 18. Prelude (Enterprise Registration)
- 19. MyChart
- 20. OpTime and Anesthesia
- 21. Resolute Hospital Billing and Claims
- 22. Resolute Professional Billing and Claims
- 23. Wisdom (dental)
- 24. Stork (OB)
- 25. Tapestry (Managed Care)
- 26. HIM
- 27. Bugsy (Infection Control)
- 28. Rehab
- Haiku/Canto/Rover (mobile)



My M.A. loves Epic. She's so happy to be able to secure chat with me.

-- Emily Miraflor, MD

#### **Stats At-a-Glance**

<ul> <li>5,622 AHS Users</li> <li>79 Trainers</li> <li>95% CPOE: % of orders entered into the system by ordering provider</li> <li>29 Epic modules implemented</li> <li>126 Interfaces live on Corepoint (New interface engine)</li> <li>50+ Legacy applications being decommissioned</li> <li>1,254 Patients enrolled in MyAlamedaHealth as of October 24</li> <li>111 Appointments schedule online</li> <li>300+ AHS Super Users</li> <li>170 Epic support staff</li> <li>367 External at-the-elbow supporters, including 10 MDs</li> </ul>						
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"[With Epic] I'm a better doctor now. It's more work, but well worth it."

Taft Bhuket, MD Chief of Gastroenterology



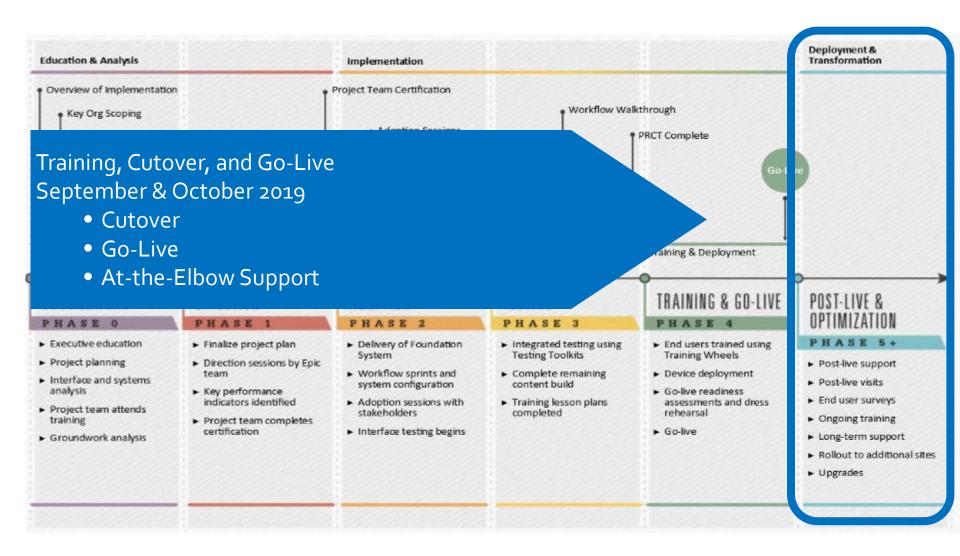


### Performance Metrics – Open/Closed Incidents



Tech Group	Open Tickets 10/24	Open Tickets 11/1	Open Tickets 11/8	Open Tickets 11/12	Open Tickets 11/13	Open Tickets 11/14	Close Ratio
Technical-Desktop	392	303	351	367	323	320	89.35%
Epic Ambulatory	188	251	245	246	248	245	81.82%
Epic Willow	113	111	151	143	133	132	88.11%
Beaker/Laboratory	107	104	87	92	86	90	87.57%
Epic Patient Access	114	138	73	70	64	60	94.59%
Epic ASAP/CareEverywhere	64	33	27	42	47	47	91.25%
Epic IP Orders	79	75	83	86	88	91	86.04%
Epic Clin Doc	48	32	29	27	29	34	95.01%
Epic Ancillary -PACS	45	29	8	9	10	10	91.38%
Epic Hospital Billing	70	84	68	72	80	86	68.15%
Epic Principal Trainers	64	42	44	30	31	33	93.25%
	1284	1202	1166	1184	1139	1148	87.87%
CHANGE		-82	-36	18	-45	9	

### **Implementation Overview**



### CY2020

#### IS Governance Structure

 Standing up a new IS Governance to govern the Optimization phase and to drive balanced decision-making process for future IS enhancements, projects and investments prioritization.

#### **Right-size Staffing**

 IS staffing demand/capacity assessment underway to proactively plan allocation towards maintenance, services requests and new projects

**COMING SOO!** 

#### **Archive Project**

- The Archiving solution will provide hosted access and storage of that data in a cost-effective, secure, and accessible manner.
- The vendor of choice for the Archiving solution is **MediQuant**.













Teamwork makes the dream work.
Thank you AHS for an Incredible go-live

<u>nttps://www.youtube.com/w</u>

atch?v=LxYO1EeErDw













## **Backup Slides**

### **IS Governance DRAFT**

December 4, 2019

### The need for Governance

It has been too much of Act, Act, Act. The time is for Action. More than doles, we need delivery. Good Governance is more than doles & includes development and delivery.

The rich can always buy the Government, but good governance, is necessary for the poor. It is the poor who will suffer the most in the absence of good governance. The country does not need a ruler, it needs a servant.

Narendra Modi Prime Minister of India since 2014



### What is the purpose of Governance?

- Align with operational/organizational goals
- Foster a process of disciplined decision making
- Monitor progress and approve changes





## Why Change?

## Clear decision making, scope management and issue escalation

- Remove silos of activity
- Eliminate the duplication of effort by multiple teams; streamlined organizational structure; integrated advisory committees
- Ensure integrated clinical (and other disciplines) governance across care settings and disciplines
- Develop a blended leadership (clinicians, physicians, operations and IS) and decision-making - Decision making authority will be at the lowest appropriate level with operational ownership
- Prevent circumventing of the decision hierarchy and issue escalation process

#### **Components of Good Governance**



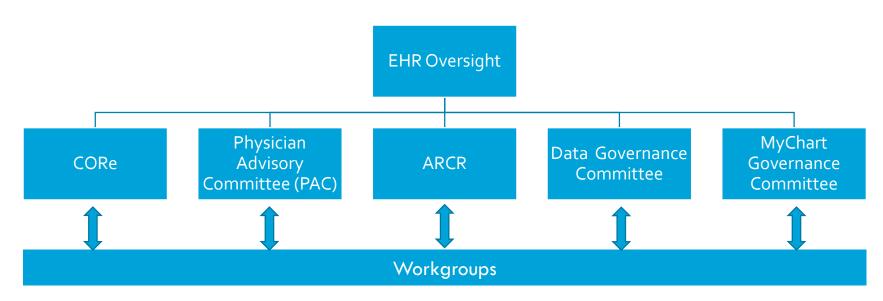
#### Rule of Law

- Transparency
- Responsiveness
- Collaborative
- Equity and Inclusiveness
- Effectiveness and Efficiency
- Accountability
- Participation

- Effective Structure (what we are here to discuss)
- Program Management (in process of spinning up)
  - Accountability
  - Measurement
- Repeatable Work
  - ITIL / LEAN processes (manager training in January)
  - Track everything (tickets)
  - Demand capacity (time tracking starting in January)
  - Change management (process developed)
- IT Service Management (ITSM) Tools
  - Service Desk System (evaluation started)
  - Project Management (interim tool selected)
  - Configuration Database (TBD)
  - Change Management (tool in use)
  - Time Tracking tool (January)

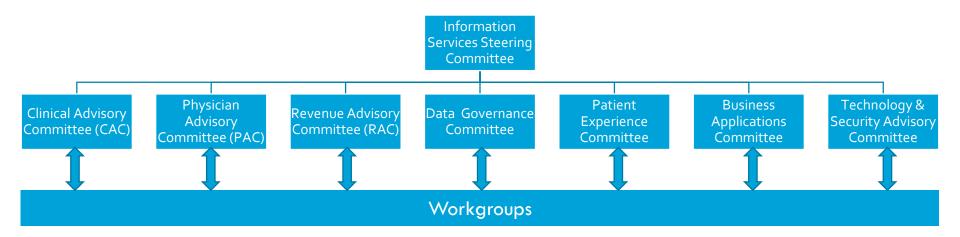
## How are we structured today?





## How should we structure for good governance?





# IS Governance decision hierarchy and roles Steering Committee

- Decision Making
- Strategy
- · Final approval and direction setting
- Sponsors IS investments
- Budget, scope changes, schedule
- Education and advocacy

#### **Advisory Committees**

- Integrated workflow decisions consistent with AHS policies
- Integrated system configuration decisions consistent with AHS policies
- Approves and recommends workflows
- Offer advisement and recommendations for IS Steering Committee

#### **Work Groups**

- Provide subject matter expertise and front-line staff
- Update and implement workflows
- Offer advisement and recommendations for Advisory Committees



## **Next Steps**







- 1. Discussion, ideas, buy-in, alignment
- 2. Launch Committees
  - Engage chairs (from Operations)
  - Determine committee members
  - Develop charters / detailed scope
  - Conduct governance kickoff / orientation
- Iterate on the process (together)
- 4. Continue to put tools in place
- 5. Let's keep it simple!

