North Country Healthcare Implements MEDITECH Expanse Surgical Services in Three Critical Access Hospitals

SNAPSHOT

Opportunity

To improve care by implementing a shared surgical services solution.

Solution

MEDITECH Surgical Services

Benefits

- Supplements a shared EHR and patient portal
- Standardizes patient information, processes, and protocols
- Provides a familiar look and feel across the organization

Profile

Nestled in the northernmost region of New Hampshire, North Country Healthcare is an alliance of three Critical Access Hospitals and a home health and hospice agency. Formed in 2015, the alliance serves a population of 30,000, ensuring these communities have access to surgical care and medical services.

Introduction

North Country Healthcare, an alliance of healthcare facilities in northern New Hampshire, includes three Critical Access Hospitals that offer surgical services. Although the CAHs offer many of the same surgical procedures, each facility specializes in specific procedures; it's common for NCH surgeons to provide care at multiple locations and for patients to be referred to other NCH hospitals for surgeries.

As the surgeons traveled to the three facilities, they found it cumbersome to learn different EHRs and workflows. Patient information wasn't shared among the CAHs, making recordkeeping processes laborious for staff; more importantly, patients had to ensure their records matched from facility to facility.

So, in 2018, as part of NCH's mission to transform healthcare delivery to the region, the partnering hospitals decided to move to one shared MEDITECH Expanse EHR, including the Surgical Services solution.

By December 2020, MEDITECH Expanse was LIVE at NCH's three critical access hospitals:

- Weeks Medical Center (Lancaster, NH)
- Upper Connecticut Valley Hospital (Colebrook, NH)
- Androscoggin Valley Hospital (Berlin, NH)

Now, clinicians throughout the organization have a complete view of their patients' healthcare journey in real time.

"The MEDITECH Expanse EHR is truly interactive and connects all North Country Healthcare facilities," said Darrell Bodnar, the CIO of NCH. "Providers have a much better understanding of their patients' overall health, while all patients can view their records, manage their care, and interact with their clinicians regularly through just one secure patient portal — with no need to juggle multiple usernames and passwords."

Implementing Surgical Services

NCH implemented MEDITECH's Expanse EHR and Surgical Services solution concurrently.

At the project's start, the NCH Governance Committee defined their shared goals for the Surgical Services implementation. Providing patient-centric care and improving communication between general practitioners and surgeons were crucial.

Other implementation goals included:

- Improving the sharing of information between office and surgical staff.
- Providing documentation to support and assist coding and billing.
- Improving patient access to services and patient satisfaction.
- Interfacing Provation® iPro, an anesthesia solution, with MEDITECH.

Planning through a pandemic

NCH conducted its kick-off call for the Surgical Services implementation in December 2019 and set a LIVE date in December 2020. During the initial planning phase, the NCH EHR Governance Team formed a core team consisting of one representative from each hospital. The core team ensured they had contacts who specialized in applications integrated with Surgical Services, such as Pharmacy, Billing, and Materials Management. These connections were important; as with any integrated system, interdependencies within the building process often require teams to collaborate.

Core team training with the MEDITECH Surgical Services specialist also started in December 2019, just prior to the emergence of COVID-19. The MEDITECH specialist held four training sessions between January and August 2020. Due to the pandemic, these training sessions were moved to a virtual setting.

As in-person meetings became increasingly difficult, the NCH implementation team, including the core team, started conducting weekly virtual building sessions that lasted three hours and allowed the team to complete aspects of the build together.

Overcoming challenges

Initially, NCH's implementation team experienced the challenges they had anticipated with marrying hospitals of different sizes, with their own specialties and unique cultures; conforming to one standard sometimes required compromise. The core team agreed early on they wanted to ensure documentation was as streamlined as possible and worked toward that goal throughout the standardization process.

However, new challenges emerged as COVID-19 spread throughout the region. Resources became scarce during the implementation phase and core team members were unable to meet safely in person. Also, in the middle of the implementation, Weeks Medical Center's Surgical Core Team Leader left her position. Despite this loss, the team moved forward with their build to ensure a robust, integrated system. An interim manager was hired in the fall.

Building preference cards

An important part of the Surgical Services build, preference cards ensure surgeons have everything they need on hand in the operating room. The Surgical Services core team expedited this process by creating a shell of each preference card that could be edited later with items, implants, and charges when the dictionaries were ready.

In total, NCH created 1,030+ preference cards for 720+ procedures, mitigating the impact of workflow changes and standardization. For example, urologists travel to all three hospitals to perform cystoscopies, but the materials used for this procedure may vary from location to location. To accommodate these physicians, the core team created preference cards for each provider/location combination to ensure the appropriate items are ordered every time the procedure is performed.

Interfacing to an anesthesia solution

In 2020, anesthesiologists and nurse anesthetists at NCH replaced paper-based documentation methods with cloud-based Provation® iPro, a mobile anesthesia information management system that seamlessly interfaces with MEDITECH.

Because Provation iPro is mobile, an anesthesiologist or CRNA can bring a tablet to a patient's bedside to perform preoperative interviews, ensure consistent charting across all operating room and non-operating room anesthesia locations, and enter post-operative notes on the go – all while ensuring procedures are documented in real time. When the case is finalized, the information is sent to MEDITECH's Expanse EHR.

Testing and training

Medical staff endorsed the new system and standardized workflow, anticipating the benefits to patient care. To ensure the solution would meet the surgeons' needs, the Surgical Services core team gave these providers access to the hold queue, where they could offer feedback on equipment, IV orders, medications, and other items that should be part of each procedure.

After building and testing were complete, core teams began training clinicians. The Physician Documentation core team was responsible for training surgeons, anesthesiologists, and CRNAs. These educational sessions focused on ordering, documentation, and discharge processes.

Nursing staff training varied based on the specific needs of each facility:

- Androscoggin Valley Hospital had already been LIVE with MEDITECH, so each nurse received one-on-one training related to using Surgical Services.

- Upper Connecticut Valley Hospital conducted a virtual training session that walked through the care of the patient from start to finish.

- Weeks Medical Center held virtual training sessions for each nursing position, such as preoperative or PACU.

In all cases, a core team member provided additional support, either virtually or onsite. Nurses at Upper Connecticut Valley Hospital and Weeks Medical Center also joined generalized nurse training to cover topics such as allergy management, medication reconciliation, bedside verification, and the transfusion administration record.

To enhance staff knowledge of the Surgical Services solution, NCH publishes Surgery Snippets, a weekly newsletter that responds to questions asked during the previous week.

Going LIVE

In December 2020, all three facilities went LIVE with MEDITECH Expanse, including Surgical Services. Because the hospitals are approximately 40 miles away from one another, NCH created a command center to oversee the organization-wide go-LIVE. The command center also assisted onsite staff with virtual support, if needed, due to COVID-19.

To prepare for the go-LIVE and ensure clinicians were not overloaded, caseloads were reduced for the first few weeks of the transition; staff were given ample time to adapt to entering orders, reconciling medications, providing discharge instructions, and performing other tasks in the new system. As a result, LIVE day and the weeks that followed went smoothly.

Realizing the benefits

Since going LIVE with MEDITECH's Surgical Services solution, nurses have indicated that documentation has improved and navigation is more efficient. This feedback was confirmed in the CMS survey, which all three hospitals easily passed. Nurses who were involved in the surveys noted it was easy to navigate to documentation, find the WHO Surgical Safety Checklist, and locate the information needed.

Streamlining the PAT process

Streamlining the preadmission testing process through Surgical Services' PAT desktop has reduced the burden on PAT nurses. When cases are booked, the system automatically lists PAT calls on a preoperative call list seven days before the surgery date. Nurses use the PAT call list to review their weekly workload of pending calls and allocate time throughout the week to contact patients. If the nurse is unable to contact the patient or complete the call, the system keeps track of any data entered and marks the call as attempted, indicating that a PAT nurse will need to make a follow-up call.

"Our surgical staff really appreciates the call routine in the PAT desktop," said Deb Bergeron, RN, a clinical systems analyst at NCH. "It enables staff to space out the calls more evenly throughout the week and track progress, which has really improved communication with our patients."

During the preoperative call, the nursing staff is able to complete the preadmission assessment; verify histories, problems, allergies, and home medications; and ensure necessary testing such as an EKG is complete. Having this information readily available streamlines the PAT process, reducing the burden on nurses. It also reduces the burden on patients, who no longer need to travel for preoperative visits and have the option to use lab services closer to home if bloodwork is needed.

The system may alert the anesthesia department to contact the patient based on preadmission assessment screening responses. Because the assessment is done on the operative account, all the documentation is within one account for the surgical team to review.

During each preadmission call, staff provide verbal preoperative education; the same information is then sent to patients so they have a copy to reference. Also, staff are able to enter standardized orders during the call, which appear in a hold queue until the surgery date. In addition, post-operative care is detailed and scheduled

Standardizing these processes has streamlined the workflow for surgical staff, giving them back time to focus on other responsibilities. Although the virtual preoperative visits were initiated as a response to the pandemic, they continue to save time for staff and patients, leaving little reason to return to in-person preadmission visits.

Delivering more consistent care

Now the documentation process for every surgery is standardized across all three facilities, with only minor variations based on the specific procedures performed at each location. Physicians and nurses feel they can travel to any of the three hospitals and know exactly what to expect. These standardized processes not only save clinicians time but also ensure patients receive consistent care throughout NCH.

In addition to standardized surgical care, NCH hospitals are benefiting from:

- Handheld devices, which nurses use to collect vital signs and record medication administrations at the bedside before and after surgery.

- A streamlined patient referral process among the three hospitals. Data is entered in one shared patient record, giving clinicians access to the data they need, whenever they need it.

- An improved charge reconciliation workflow to close out cases.

- Easier system management. IT staff manage system-specific changes in one EHR instead of three, enabling NCH to meet regulatory requirements more efficiently.

Moving forward

Because NCH hospitals share the same integrated EHR, patients are confident that every clinician they see has access to "one source of truth." They experience smoother transitions after surgery, and their health information is accessible in one patient portal.

Despite all the benefits to care delivery, NCH didn't rest on its laurels. To further improve and streamline preadmission processes, the organization implemented preoperative questionnaires through the Patient and Consumer Health Portal. This capability allows patients to complete the questionnaires at home, whenever they want, while also giving valuable time back to the PAT nursing staff. NCH is currently implementing the Specialty Care Flowsheet, as its streamlined design will give care providers the ability to document and review data from a single flowsheet.

"We're pleased with our improvement efforts and what they mean for the health and wellbeing of our communities," said James Patry, VP of Marketing and Communications at NCH. "Technology will continue to play an important role in our mission to deliver consistently excellent, integrated healthcare."

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