

211 - Advanced Clinicals: Critical Success Factors

Presented by: Terri LeFort, Healthtech Incop

Abstract: As organizations move forward with the implementation of Advanced Clinicals, a number of critical success factors need to be considered. Two of these critical success factors center around readiness and process redesign. This presentation will outline the impact of readiness and process redesign along with key considerations when incorporating them into your project plan.

Presenter Bio: Terri LeFort is Vice President with Healthtech Inc. in Toronto, Ontario. She has a Bachelor of Nursing and over 15 years in clinical practice, both on the front lines and in management. Terri and her staff have significant experience in the assessment, planning and implementation of advanced clinicals including elements of the EHR such as clinical documentation, computerized provider order entry (CPOE) and electronic medication management. In addition to enterprise EHR initiatives, Terri and her team have provided strategic leadership to initiatives involving Emergency Department systems, OR systems and clinical viewing systems.

101 - Attitude is Everything - "Moving Forward Together"

Presented by: Maryann McLeish, South East Regional Health Authority – Moncton (REE Contest Candidate)

Abstract: This motivational presentation will be educational, uplifting and enlightening. It will help you to find a focus for motivating staff to accept and even embrace changes. The idea of "Attitude is everything" has been around for a long time we have all heard the phrase. We all know that positive people are much more motivated to embrace change and realize its potential. I hope to motivate, inspire and share with you the keys to successfully getting staff motivated to accept and embrace change. In the fast evolving world of Healthcare and its integration with Information Technology (IT), success relies heavily on those expected to use IT. Inevitably the outcome IT success plays a vital role in the services being offered to at the end of the line. In order to ensure IT successes we have to ensure an attitude that will reflect success. You can indeed picture your way to success and turn problems into opportunities. Change attitude from negative to positive and you can change the outcome from IT failure to IT success.

Presenter Bio: Maryann has been working in Health care for 20 plus years with a background in Nursing. Maryann has taken her clinical expertise into the Technology world as a Systems Analyst and for the past 10 years her focus has been Applications Support, Implementation and Development. She has a Masters Degree in E-Business and a Bachelors Degree in Nursing and is also a graduate of Information Technology Institute, The Miss.A.J.MacMaster School of Nursing and New Brunswick Community College Nursing Assistant Program.

109 - Building an Electronic Acupuncture Assessment: We Put the CH'i into Ch'ange at the Bedside

Presented by: Margaret Burns, Bridgepoint Health

Abstract: With its many points and meridians acupuncture presents a special challenge to the electronic documentation builder. Faced with the ubiquitous question from clinicians - "Why can't we just do it in narrative?" - the builder might acquiesce, and in so doing, diminish the overall utility of the electronic documentation system. By establishing dynamic dialogue between builder and clinician, the clinical build can be designed to capture the nuances of practice, while maximizing quantifiable data. Applied to the build of an electronic Acupuncture Assessment, this process provides a unique opportunity to chart new territory in an ancient practice.

The advent of electronic documentation at Bridgepoint established a need to review and revise acupuncture treatment policies to ensure best practice guidelines were being upheld. This led us to install verified outcome measures with which to evaluate our practice. We experienced a dramatic paradigm shift from a mostly subjective form of practice to an evidence-driven approach based on improved access to trendable data. This presentation will trace the symbiotic relationship between practice and electronic design with examples of consultation, review, teaching and creative use of Meditech's system. The outcome is an assessment that guides best practice and gives clarity to a centuries-old treatment intervention that has now established itself into the mainstream of health care.

Presenter Bio: to follow

218 - Core Technology Program – Aligning Technology Investment with Business Goals

Presented by: Stephen Harris & Don Byrant, Xwave Healthcare

Abstract: The focus of the Core Technology Program (CTP) is to provide Enterprise customers with accurate information about their current technology infrastructure and deliver a solutions roadmap that is strategically aligned and tactically applied to meet the business goals and objectives of the whole organization. CTP methodology has been developed through years of experience utilizing Information Technology Infrastructure Library (ITIL) Best Practices. We begin with an in-depth assessment of an enterprise's current Information and Communication Technology (ICT) infrastructure. By tapping into the organization's data and process flows our team will provide a detailed view of the existing state. Then in the second phase, through interviews and analysis, our business and technology specialists will identify and focus on key operational issues and determine the longer-term enterprise-wide objectives. Thirdly, we develop the architecture and implementation plan toward!

Aligning those objectives within the context of time, budgetary and run-state constraints of the organization. And finally, based on the CTP blueprint, technology and human resources are deployed to carry out the construction process and/or management of the improved infrastructure. The conclusion of the CTP Blueprint phase provides the client with a long-term strategy and technology design

document that aligns the organization's future ICT infrastructure with its long-term business goals. Benefits of CTP include: improved end-to-end operational effectiveness; fully synchronized ICT investment strategy; "future-proofed" infrastructure; clearly communicated organizational ICT policies/procedures; and the ability to compare suppliers and proposals.

Presenter Bio: Bio to follow

104 - Did you "Get" It? From Bernoulli to PCS

Presented by: Doug Bebb/ Vangie Byer/Sheila Hops, Bloorview Kids Rehab

Abstract: This presentation will outline how Nursing and Respiratory staff retrieve ventilator data using the "Get Monitor Data" function in PCS from the Cardio Respiratory Corp's "Bernoulli® Enterprise" system. The presentation will highlight the set-up of the HL7 ADT interface between MEDITECH and Bernoulli®, alarm parameters and the end-user training required for staff.

Presenter Bio: Doug Bebb is an RN working as a Clinical Application Specialist in the IS department at Bloorview Kids Rehab in Toronto, Ontario. He is currently responsible for the PCS module at Bloorview. Vangie Byer is a Consultant with GRA Consultants. With a nursing background, she has provided support to various Meditech modules since 1992. She currently helps support PCS among other modules at Bloorview Kids Rehab. Sheila Hops is the Clinical Information Systems Manager for the MEDITECH modules at Bloorview Kids Rehab. Sheila brings many years of nursing practice to her position as Clinical IS manager at Bloorview Kids Rehab.

209 - Do you have a "HOLE" Electronic Health Record ?!

Presented by: Margaret Hulvey, Valco Data Systems

Abstract: In 2004, there were more than one billion encounters between physicians and their patients, with over 910 million of these encounters occurring in physicians' offices. Less than half of these visits were made to the patient's primary care physician. It has become quite obvious that healthcare documentation requires a significant paradigm shift. We are all challenged to integrate ALL healthcare information into one place so that it is available to healthcare professionals at the most important time in a patient's life. Illnesses are more complicated than ever before. Having a patient's complete medical history prior to being admitted to a hospital is vital to a patient's medical outcome!! This presentation explores the options available to healthcare organizations to collect and share a "complete" Electronic Medical Record.

Presenter Bio: Margaret Hulvey, MSHA, RHIA, CHP, CHC is a Senior Solutions Consultant for Valco Data Systems. She is currently completing final requirements toward an Executive Master's Degree in Health Administration and is a Registered Health Information Administrator. Margaret also holds certifications in Healthcare Privacy and Healthcare Compliance. Her experience includes ten years of Director level positions in an acute care environment in the areas of HIM and Corporate Compliance. Margaret's role at Valco Data Systems includes educating hospital professionals on the benefits of a complete electronic health record. She provides consultation and formal educational opportunities representing the clinical and non-clinical applications and benefits from imaging and archiving initiatives.

204 - Don't call us, we'll call you!

Presented by: Ted Molloy, Array Software

Abstract: Is the phone your friend or would you prefer an alternative for managing routine requests or questions from your customers? Information Technology, Plant Operations, Human Resources and BioMedical / Engineering (to name a few) teams have come up with various ways to service their clients. This presentation will discuss options for moving both incoming and outgoing communication to an electronic medium. The presenter will also explain how education and expectations are critical ingredients for a successful transition such as this. From travel arrangements to shopping to healthcare inquiries, for many aspects of our lives, the Internet has replaced the telephone except for the most urgent issues. Has the time come for that option to find a home in the inner workings of the hospital?

Presenter Bio: Ted Molloy has been supporting Array's clients for 15 years now. Participating in sales, implementation and support for all three of Array's products, Ted spends much of his time working directly with users. By being in the hospital itself, Ted continues to witness the cultural changes that have encouraged health care to be more business like in its practices. Prior to joining Array, Ted spent considerable time in both manufacturing and financial services where he gained experience in project management, process improvement and workload measurement. Ted recognizes that there are plenty of people out there who are experts in providing quality healthcare; he hopes that he can help hospitals make it more affordable.

115 - Down the Highway Past the Overpass

Presented by: Evelyn Connors, Eastern Health

Abstract: The restructuring of the Health Care Boards in Newfoundland and Labrador in 2005 made it apparent that within the Eastern Health Regional Authority there was a wide variation in the collection and provision of inpatient and SDC clinical information. This information is traditionally used for patient care, utilization, planning, evidence-based decision-making and research. This presentation will give an overview of our first step towards an integrated clinical information abstracting and reporting system, the successful merger of two of the three previous hospital board abstracting and reporting systems into one system and one database. This involved two Meditech Systems, a health information

management vendor (3M), a contracted consulting firm (Meditrain), our local Information Management and Technology Staff and our local Health Information Services and Informatics staff. The actual highway took us from St. John's to Carbonear, Old Perlican, Placentia and Whitbourne, a round trip of 420 km. The virtual highway was another story! We now have an automated process that takes the demographic data from all

sites and interfaces it with the St. John's Health Information System. All sites have access to the system for abstracting and reporting purposes.

Submission of the data to CIHI is centralized as is the data quality and editing process. Reporting and data analysis can now be done from the one

system without the need to manually integrate the data from different sites. This integrated information will now be fed into the COGNOS Cube, a business intelligence tool that allows desktop access to all program and unit managers. Our next step will be to integrate the remaining previous health care board.

Presenter Bio: Evelyn Connors is presently the Manager of Data Quality, Coding and Abstracting with Eastern Health. Certified Health Information Management Professional with many years experience in the health information field. Have experienced two regional restructurings in the last 15 years and have been responsible for the implementation of the regional clinical information abstracting and coding process and system.

312 - Duplicate Record Management Tools

Presented by: Jim Butler/ Derek Moore, MEDITRAIN Inc.

Abstract: MEDITRAIN has become a world leader in the realm of patient duplicate record management. Duplicates are a fact of life in any patient registration environment. Errors are a natural part of the process. Unfortunately, error management is not.

This presentation is offered for Medical Records professionals and any other HIS staff involved with MPI maintenance. It covers our Automated Merge Service and MergeMaster products and how they can eliminate duplicate records and prevent future errors from occurring.

Presenter Bio: MEDITRAIN, based in St. John's Newfoundland, was founded in 1997 and currently offers a wide range of MEDITECH related products and services. Your two presenters are Jim Butler and Derek Moore. Jim's background is in sales and marketing. He has worked with a number of IT based firms, servicing a wide variety of customers for their hardware and software requirements. Derek is one of MEDITRAIN's senior programmers, involved with the day to day workings of our many products. In addition to Record Management, he specializes in Scripting and Real Time Interfacing.

220 - eHealth: The Transformation of Health Care

Presented by: Brad Hawkins, MEDSEEK

Abstract: This presentation will define eHealth; share interesting trends and statistics about internet usage within health care; and show examples of how U.S. health care organizations are transforming health care delivery to their constituents (consumers, patients, physicians, employees) through eHealth.

Presenter Bio: Brad Hawkins, Director of Account Management, has lead and developed a dedicated team that serves the needs of MEDSEEK's clients across the US and Canada. He specializes in working with healthcare executives to address various business critical demands such as: improving information exchange and care delivery, improving resource efficiency and productivity, accelerating cash-flow and achieving higher customer satisfaction and quality of care. Through his experience in working with over 600 healthcare organizations, he has attained the knowledge that allows MEDSEEK to align technology with the processes that solve business critical demands and allow clients to achieve their strategic eHealth initiatives.

110 - Electronic Health Record in Newfoundland and Labrador

Presented by: Tom King, Newfoundland and Labrador Centre for Health Information

Abstract: The Newfoundland and Labrador Centre for Health Information has a mandate to develop a comprehensive, province-wide information system that securely provides accurate and current information to authorized users of the health and community services system.

The information system is called the Health Information Network and it supports an Electronic Health Record (EHR) that will provide individuals with a secure and confidential lifetime record of their key health history and care. The EHR, the focus of Mr. King's presentation, will integrate key clinical components so that when a health provider reviews a patient's file they have comprehensive information which will help to provide better service.

Mr. King's presentation will provide an update on the progress of the multiple projects that will help achieve the overall EHR vision in Newfoundland and Labrador. This update will include projects from four main categories:

1. Core EHR
2. EHR Clients or systems that integrate with the core EHR
3. Infrastructure Services
4. Stakeholder Involvement

Core EHR

The EHR vision includes the following main components:

- a patient identification / registration system
- diagnostic imaging
- laboratory data (results-reporting) and;

- pharmacy information components
 - health provider registry system
- EHR Clients or systems that integrate with the EHR

The core EHR will ultimately integrate with other related health information systems. A progress report on Electronic Medical Records (EMRs) and how telehealth technology can assist the health care system in the management of chronic diseases will also be a part of the presentation.

Infrastructure Services

Mr. King will also identify how the province will address the significant infrastructure requirements resulting from the deployment of the EHR so that it can meet its identified bandwidth and service delivery targets.

Stakeholder Engagement

This part of the presentation will address how and why Newfoundland and Labrador is in an advanced state of readiness for EHR deployment as a result of a collaborative model of people, business processes, and technology.

Presenter Bio: To Follow

216 - Evolution of Scripting - with a Focus on 6.0

Presented by: Charles Williams, Summit Healthcare Services

Abstract: This session will explore the ever expanding use of scripting in hospitals and review its use as MEDITECH applications evolve to new platforms. Specifically, we will discuss the different types of scripting and, more importantly, the factors you should consider before using scripting as an approach to interfaces. We will review some clever uses of scripting and identify what the use-case trends are. Lastly, this session will review techniques for interfacing with all MEDITECH application platforms to include Magic, NUI, Client Server, EMR, PCS and 5.6 and 6.0. This session is for programmers, analysts, IT professionals and anyone else who is responsible for integrated data.

Presenter Bio: Charles Williams is Chief Technical Officer for Summit Healthcare Services. He currently oversees all development for Summit and actively participates in key implementations. He is the Author of 'Professional Visual Basic Databases' and coauthor of 'Professional Visual Basic 6'; both WROX Press books. He has a passion for integration and is always willing to talk to those who have questions.

108 - Giving Up to Gain More

Presented by: Vangie Byer, Bloorview Kids Rehab ; Glen Sutherland, ErinoakKids

Abstract: ErinoakKids is a children's treatment centre that annually has approximately 7500 outpatient appointments in the Speech Language program. Over the past months, Community Wide Scheduling has been implemented. This implementation has moved the program from a decentralized scheduling module in which all therapists booked their own appointments to a centralized module. This presentation will outline the process followed, the challenges faced, and the current status.

Presenter Bio: Vangie Byer is a consultant with GRA Consultants Inc. With her nursing background, she has supported Meditech modules for the past 15 years. She has assisted Bloorview Kids Rehab and their partner ErinoakKids with the implementation of various modules.

Glen Sutherland is a registered audiologist with many years of clinical and progressive management experience. He has worked clinically in the hospital setting (University Hospital in London, Toronto East General Hospital) and in a social service setting (Canadian Hearing Society); in the community as a District Director (Canadian Hearing Society) and as a Program Coordinator (VOICE for Hearing Impaired Children); as a lecturer in the education setting (George Brown College, Georgian College, University of Western Ontario, York University); and, in the private sector as a Territory Manager for sales and distribution of hearing aids (Oticon/Phonic Ear). Presently, he is the Director, Quality Improvement at ErinoakKids. In this position, he oversees the CWS implementation.

102 - If We Can Put a Person on the Moon...We Can Build a Resourceful Documentation System

Presented by: Tiffany Niles, Margaret Burns, Larissa Wisniewski, Linda Yetman, Bridgepoint Health and Healthtech Inc

Abstract: With the advent of the electronic health record and accessibility to information, there are increasing pressures on healthcare organizations to monitor the care that is being given, and "demonstrate with statistical data that patient safety, the quality of patient care and the cost-effectiveness of this care is constantly being analyzed and acted upon" (King, et al, 2003). However, electronic systems built collaboratively between clinical experts and programmers provide the best system possible (Sangiuliano quoted by Shaw, 2006) in order for data to become meaningful in numerous ways. Furthermore, the required data elements for hospital funding have not always been introduced in a systematic way in an electronic clinical documentation build. Consequently, the build of an electronic system offers huge opportunities to permit data for an electronic health record to be leveraged for secondary uses at an aggregate level to profile patient information in order!

to contribute to research efforts, contribute to policy making, and contribute to positive patient outcomes. This presentation will highlight the experience of a clinical design team who has used critical thinking to embed data elements required for hospital funding into a clinical build as well as to develop a system that will cultivate critical thinking for decision-making at the bedside to influence immediate patient outcomes. These combined efforts will offer unique ways for data to be leveraged for secondary uses such as for hospital funding and administrative decision-making as well as to influence patient outcomes in "real time" – at the bedside – and through profiling information through aggregate data collection for research purposes to enhance patient outcomes over time.

Presenter Bio: The presenters are members of an interdisciplinary electronic clinical design team. This team is charged with the implementation of an electronic clinical documentation system at Bridgepoint Health which is a major complex care/rehabilitation healthcare facility in Toronto, Ontario.

106 - Implementing a Workload Measurement System using ITS module

Presented by: Rowena Iordanou & Christopher Lau, Bloorview Kids Rehab

Abstract: Bloorview Kids Rehab implemented a workload measurement system using Meditech's ITS module based on MIS Standards at the client specific level. Since implementation, all clinical staff are required to use this module to enter their workload (stats) data both client and non-client related. Bloorview uses Cognos 8, a business intelligence tool to generate monthly, quarterly and year-end reports based on inputted data. This presentation will include interactive demonstrations of how a typical user will enter workload and how Cognos 8 is being utilized by our end users (managers, directors and vice-presidents).

Presenter Bio: Rowena Iordanou is an Application Specialist for the ITS module and has been involved in working closely with Health Data Records, Finance and Decision Support. Christopher Lau is a Decision Support Analyst and is involved in supporting and developing the Cognos platform for Bloorview users.

114 - Integration of New Technologies in the Emergency Department

Presented by: Nander Stevens, The Scarborough Hospital & Beacon Partners

Abstract: The Scarborough Hospital (TSH) Emergency Department (ED), in conjunction with MEDISOLVE, eTRIAGE (University of Alberta), University of Toronto Healthcare Resource Modeling Laboratory, and Centre for Global e-Health Innovation received approval from Canada Health Infoway Innovation and Adoption Fund for a project grant for the Enhancing Emergency Services: A Patient-Centered Approach Project(EES). The Project supports the introduction and evaluation of multilingual patient-centered kiosks in ED waiting rooms at TSH's Grace and General Campuses, and an electronic triage system. . The EES project focuses on patient interaction and involvement in the triage reception and reassessment processes for ambulatory patients (CTAS 4 and 5) only. The project has two distinct patient and data flows: initial assessment and re-assessment. Patients are first visually triaged by a nurse. Patients with a CTAS level of 1 or 2 are processed directly into an Emergency Department bed, thus the patient and data flow remain outside the scope of this project. CTAS Level 3 patients are triaged immediately by a nurse, who will then direct the patient to the waiting room, or immediately admit the patient. Those level 3 patients assigned to the waiting room will enter the EES data flows.

This presentation will outline the technical processes utilized to integrate 2 new technologies with the existing MEDITECH EDM, and workflow of a very busy Emergency Department. The process employed to define the conceptual, logical and architectural diagrams will be reviewed. The planning, developing and implementing the integration framework will be thoroughly discussed. Technical, and data integration challenges will be presented, along with the surprises inherent to all innovation projects. Lessons learned will be summarized.

Presenter Bio: Bio(s) to follow

307 - IPeople Quest

Presented by: Liz Morgan, Interface People

Abstract: IPEOPLE QUEST is a customizable , web-based Electronic Medical Record (EMR) and Decision Support System (DSS) solution. With IPeople Quest, healthcare providers and staff members are provided access to real-time and historical patient data from all HIS systems through a single view. The flexibility of our solution allows for these views to vary based upon the specific needs of the individual user or group. IPeople Quest provides pre-built, yet customizable dashboards, an enriched report writing solution, and full drill down capabilities for physician analysis, financial analysis, patient care statistics, quality assurance, peer review, supply management, and beyond.

Features include:

- Interactive Communication Center
- Retrieve images, sounds, and other attachments
- Workflow and process automation
- Alert notifications via email, email pagers, and text messages
- Robust, Web-based report writing, scheduling, and distribution capabilities with graphical reports
- Embed NPR reports into Web views
- Direct, real-time access to data and embedded data mart views
- Physician and user profiling
- Pocket PC and Tablet PC views for any view
- Strong data encryption

Presenter Bio: Bio to follow

306 - IPeople Sync, IPeople Script and IPeople Assist

Presented by: Liz Morgan, Interface People

Abstract: IPEOPLE SCRIPT provides a smart, simple way to create scripts to automatically upload information into MEDITECH, Windows-based, and Web-based applications. Our tool provides scripting solutions for both the technical and non-technical user through a variety of script-building methods. IPeople Script also offers the ability to directly query MEDITECH on a real-time basis, eliminating the archaic process of screen-scraping or utilizing NPR to extract data. Enhanced drill-down capabilities, increased flexibility, and improved workflow, enable you to easily expand your script building capabilities based on the varying skill sets of your employees.

IPEOPLE SYNC provides hospitals the ability to effortlessly maintain synchronized databases and platforms during ring releases, platform conversions, or new module implementation. Sites no longer have to invest in high volume manual processes traditionally associated with the creation and evaluation of NPR reports, or the manual recreation of test databases. Using IPeople Sync, your organization has the ability to query dictionaries real-time, synchronize test and live environments, rapidly identify discrepancies, and fix errors within the view. Being web-based, IPeople Sync gives you have the ability to conduct synchronization from anywhere, for either single or multi entity networks. IPeople Sync also allows you to script patient data automatically into new test environments, eliminating the once daunting task of manual reentry of patient data.

IPEOPLE ASSIST brings a new level of intelligence to workflow and process automation by allowing users to build rules on any field or screen in MEDITECH, without limitations. IPeople Assist also contains a fully customizable toolbar allowing users to execute script functionality and launch other applications, without having to exit their current application. You can easily build procedures and best practices into the MEDITECH system, while ensuring data integrity, eliminating re-work, reducing costs, and enhancing employee performance. **Presenter Bio:** Bio to follow

301 - Mapping The Road To The Paperless Hospital

Presented by: Edward Korba, FormFast, Inc

Abstract: This will be a product demonstration of the FormFast Software for Forms Management with MEDITECH Magic or Client Server Systems. FormFast is MEDITECH's Official Partner for Document Management and can help you prepare for Scanning & Archiving. The same system used by over 145 Canadian Hospitals will be shown.

Presenter Bio: Ed Korba is the Vice President of Marketing for FormFast, Inc. Ed leads the HCA Division Consulting group crossing International boundaries. Ed has spent many years in sales and technology positions with companies like JetForm, Standard Register, and Basic Research and Technology across North America. Prior to joining FormFast in 1995, Ed was leading a sales team with JetForm Corporation, the world's leader in e-forms, located in Ottawa, Canada. Prior to joining JetForm, he was a CIO of Computer Networks for an Automotive Family in St. Louis, MO. Ed began his career in healthcare in 1988 by building bar code systems for hospitals and healthcare companies needing help in understanding media, bar coding equipment and bar codes used for identification and indexing.

304 - Med Reconciliation and Visual FlowSheet (VFS)

Presented by: Julia Courtney, Iatric Systems

Abstract: This presentation will cover two of Iatric Systems' clinical products:

-Medication Reconciliation with PDI/PDRx – Our PDI and PDRx products enable hospitals to implement and streamline the Medication Reconciliation process, from admission to transfers and upon discharge. Our routines save clinicians time, provide an electronic record of reconciliation, and display home medications and current medications all on one screen.

-Visual FlowSheet (VFS) – VFS is a mature, sophisticated clinical assessment and documentation system that is seamlessly integrated with Meditech. It is in use at hospitals across Canada and the US. Come to this session to see how your users can view clinical monitor interface data, future orders and patient plans of care, all from within your flowsheets!

Presenter Bio:

219 - MEDITECH Advanced Clinical Applications: “Ready or Not Here We Come!”

Presented by: Christopher Kondrat, Beacon Partners

Abstract: In the past, implementing new software was a concentrated effort between the Information Technology staff and the departmental managers and end users. Today, with the Advanced Clinical applications, the size and scope of the software and the associated integration demands complete facility buy-in, support, and participation.

Implementing the MEDITECH Advanced Clinical Applications comes with a set of inherent risks from a quality, patient safety, resource allocation, operational and, of course, financial perspective. Qualifying these risks and assessing an organization's ability to manage these risks is a challenging task. This presentation has two fundamental goals: (1) identify some of the larger risks associated with advanced clinical technology projects; and (2) introduce a “Readiness Assessment” approach for understanding an organizations' readiness or ability to embrace MEDITECH's new advanced clinical applications. Topics to be discussed include project charters, impact analysis, operational integration, roll out strategies, staffing impact, awareness campaign, and application readiness.

Presenter Bio: Mr. Kondrat is a Director of Consulting Services with Beacon Partners. He has conducted such Readiness Assessments with existing MEDITECH clients and coordinated the successful implementation of multiple advanced clinical applications including CPOE, BMV, ORM and PCM.

206 - MEDITECH Disaster Recovery - ISB/IDR Deployment Strategies and Success Stories

Presented by: John Macy, BridgeHead Software

Abstract: Join us as we provide in depth examples of how MUSE facility members have implemented ISB/IDR (Integrated Serverless Backup and Integrated Disaster Recovery) in their environment using backup, replication, and snapshotting to simultaneously meet various data protection and business continuance goals. You've been asked to ensure your MEDITECH data is highly available and well protected at all times regardless if there's an equipment failure, a problem that affects a single site, or even an entire region. We will give specific examples of how ISB/IDR is uniquely deployed at the following facilities:

- Anne Arundel Medical Center
- Christus Health
- Northeast Health
- And many more!

ISB/IDR technology not only provides an effective way for hospitals to ensure data availability, but does so with options to work within the common infrastructure constraints of most hospitals. Learn in detail just how powerful the MEDITECH ISB/IDR technology is and how you can deploy ONE program for cost effective Disaster Recovery and Business Continuity! **Presenter Bio:** Bio to follow

205 - MEDITECH Technology Update 2007

Presented by: Andrew Sisel, JJWild

Abstract: Join JJWild for a fast-paced tour of the latest trends in systems, storage, archiving, virtualization, client technology, and systems management for MEDITECH hospitals and how they impact the future of your MAGIC or Client/Server Systems. By sharing real-world experiences with new technologies being tested and certified with MEDITECH and from early adopters in the MEDITECH community, Jim will connect technology evolution with MEDITECH's latest system innovations to help you better plan and manage your HCIS.

Presenter Bio: Andrew Sisel has been working with MEDITECH products since 1995. Prior to working for JJWild, Andrew was an Engineer for Data General, and was actively involved with the implementation of MEDITECH's first Client Server Site at South East Healthcare and Royal Victoria hospital in Canada. As an Advisory Design Engineer for JJWild, Andrew has brought his experience to a wide number of MEDITECH hospitals across Canada which includes RSHIP, Sudbury and William Olser. Andrew is certified in IBM, EMC, and HP SAN storage technologies.

215 - Method to the Madness of Dictionary Standardization and Synchronization

Presented by: Jennifer Fortin, Summit Healthcare Services

Abstract: Dictionaries! Whether you are Magic or Client Server; everyone has them. If you are responsible for maintaining them, you will want to participate in this session. Walk through tools and techniques to assist you in analyzing and comparing Test vs. Live or Facility A to Facility B dictionaries and then learn best practices for updating dictionaries accurately and quickly. We'll look closely at simple dictionaries as well as complex dictionaries. This session is geared for any audience.

Presenter Bio: Jennifer Fortin brings over ten years of direct healthcare experience. With the first eight years at MEDITECH in implementation, project management and sales, followed by one year of consulting sales at First Consulting Group (FCG) to her current role at Summit Healthcare as a Regional Sales Director.

210 - Microsoft Reporting Services - A Primer

Presented by: Garry McAninch, Dimensions Analysis

Abstract: Healthcare organizations are continually looking at ways to deploy information to their reporting consumers. Extracting data from MEDITECH systems is the first step in unleashing the power of industry-standard reporting tools. Which tool is right for presenting this data? Microsoft's Business Intelligence strategy is to bundle reporting and analytical tools into its premier database – SQL Server 2005. These tools (Microsoft Reporting Services & Analysis Services) provide a rich and powerful enterprise web-based solution for taking information to the next level.

We will review and show many of the features of the Reporting Services tool and how easily it can be integrated into today's healthcare information management strategy. Considerations and requirements necessary to deploy this, and other, web-based reporting solutions will also be discussed. With time permitting, a demonstration on how to build a sample reports may take place.

Presenter Bio: Garry McAninch is the Principal of Dimensions Analysis; a Business Intelligence product and services firm specializing specifically in the MEDITECH marketplace. His involvement in the BI field spans over 11 years and over three continents. Garry also has sixteen years hospital I.S. management experience.

201 - Moving Towards the Paperless Environment in Meditech – Realistic Solutions and Steps to get there.

Presented by: Rhonda Vaughan, Access

Abstract: What are the Realistic Steps to get to a Paperless Environment? Want to grasp Realistic Stepping Stones available today for Meditech facilities? We'll be discussing real, no hype, enterprise-wide solutions that can start you down the Paperless Road. We will not be pushing our product line.

Presenter Bio: Rhonda Vaughan's background includes many years in Information Systems Department management as CIO. Her experience includes implementation of a HCIS system, Optical Imaging system and Forms Management in a Texas hospital. Rhonda is currently the Director of Sale for the Meditech Division with Access. Rhonda's role at Access includes assisting hospitals in shaping their vision of a paperless environment. In addition, Rhonda provides project management, implementation consulting, and educational sessions for hospitals migrating to a Paperless Solution.

202 - NPR Greatest Hits

Presented by: Joel Berman, Iatric Systems

Abstract: A collection of some of our most popular and useful tips from past MUSE international and regional conferences. Many of these haven't been presented in over 10 years! Some of the tips include:

- Faster fragments (and avoiding fragments)
- MV and ECB/ECE laser labels
- Defaulting and hard-coding selections for an LI, including loading a text file of selection values
- Getting optical disk data onto an NPR report.

This session is for intermediate and expert NPR report writers. Handout will include printouts of all examples. Come early to get a good seat!

Presenter Bio: Iatric Systems was founded in 1990 by Joel Berman and initially offered custom report and programming services to the Meditech marketplace. With over 23 years of experience working with Meditech clients, Joel's enthusiasm and technical expertise continue to foster an environment of innovation and customer service at Iatric Systems. Today, Iatric Systems provides software products, interfaces and NPR services to over 600 Meditech hospitals in the US, Canada and the UK, is well known for its ability to integrate with Meditech, and services both MAGIC and Client/Server sites.

314 - NetDelivery

Presented by: Arthur Young, Interbit Data, Inc

Abstract: Demonstration of Interbit's NetPrint family of Products – from NetFax to NetPrint Plus with Wizard. The products (for either Magic or Client/Server) provide integrated capabilities to send reports via print, fax, e-mail, and other methods. Interbit's products provide the most cost-effective and reliable reporting solution for the MEDITECH community.

Presenter Bio: President of Interbit Data, has been providing products and services in the MEDITECH community since 1984. At Interbit, he has continued to direct the development of solutions to simplify the management and operations of the IS environment for MEDITECH hospitals. Arthur holds a BA from Boston University and MSW and MBA degrees from Washington University in St. Louis.

313 - NetSafe

Presented by: Arthur Young, Interbit Data, Inc

Abstract: This new application will allow users to prepare on-going backups of any reports or information to devices throughout the network and retrieve this information in user-designed indexes whether the network is available or not. We believe this will help to fill an increasingly important gap to allow facilities to operate without interruption even in case of WAN or LAN problem..

Presenter Bio: President of Interbit Data, has been providing products and services in the MEDITECH community since 1984. At Interbit, he has continued to direct the development of solutions to simplify the management and operations of the IS environment for MEDITECH hospitals. Arthur holds a BA from Boston University and MSW and MBA degrees from Washington University in St. Louis.

217 - New approaches to Dictation and eSignature

Presented by: Chuck Sullivan, PatientKeeper

Abstract: Traditionally, dictation requires a physician to key in patient, physician, and report identifiers into a phone's keypad. This cumbersome process takes extra time and leaves room for errors that become costly to track down for the transcription department and the hospital.

Dictating from an integrated portal/mobile application enables the provider to dictate without the need to key in data because the dictation application is already aware of patient, user, and report context. This saves time and increases accuracy. The dictation can be accessed via a portal so that the report is available even before has been transcribed! This improves access to patient information thus also enhancing patient safety.

Moving eSignature applications to the handheld or to a zero-footprint web browser increases the convenience of signing anytime, anywhere. With eSignature functionality, the patient chart is just one click away in case the provider needs to reference any patient information before signing. Physicians are able to sign dictated documents, orders and scanned documents that are flagged for signature during the chart completion process all in once place. Combining the ability to sign MEDITECH documents and orders as well as documents scanned for chart completion into a single process increases the efficiency for physicians. As a result, documents are also more quickly available for review within PCI/EMR.

This presentation outlines new approaches to both dictation and eSignature, showcasing how portal/mobile software can enhance the efficiency of these two practices.

Presenter Bio: Mr. Sullivan's healthcare information technology expertise covers clinical and financial information systems as well as document management systems. He has spent the last ten years in account executive positions with companies including MEDITECH, QuadraMed, and BlueChip Technologies working with hospitals and healthcare systems to identify critical business issues and develop technical and service solutions. His experience includes wireless and Web-based applications.

105 - Our Total Joint Experience - One Never Ending Story of a Meditech Critical Path

Presented by: Brenda Hyde, Lakeridge Health (REE Contest Candidate)

Abstract: In 2005 the Ontario government implemented a strategy to increase access and reduce wait times for five major health services, including elective hip and knee replacement.

Lakeridge Health elected to participate in this project in conjunction with Toronto's Total Joint Network. The Total Joint Network is a partnership of healthcare organizations including acute care hospitals, inpatient rehabilitation hospitals and Community Care Access Centres. Through this group, it was determined that a standard TJ critical path would allow better tracking of patient outcomes and provide data which could be used to identify strengths and weaknesses in practice and process.

While other institutions worked to implement a paper version of the ultimate Total Joint path, Lakeridge chose to integrate with our current online clinical documentation and implement an electronic path.

We had made two previous, less than successful attempts to implement critical paths and by the time the Wait Time Strategy was in effect we were still unable to efficiently enter and extract sufficient relevant data for practical use.

We looked at options within the time and budget allotted and determined that Meditech's critical path should be re-visited.

We needed to develop a path that

- is multidisciplinary (Nursing, Occupational Therapy and Physiotherapy).
- captures acute and rehab goals.
- can be seen as a valuable tool to all who use it (including physicians).
- can maintain current standards of clinical documentation.
- allows extraction of significant data for analysis.
- does not increase the burden of documentation for the health care team.

Join me for an interactive journey to ...

Our Past: What have we learned?

Our current State: What does our path look like today?

Our future: Have we built an efficient Critical Path in Meditech?

Presenter Bio: Brenda Hyde is a Registered Nurse and Health Informatics Consultant at Lakeridge Health in Oshawa, Ontario. She has had more than twenty years of bedside experience in a variety of health care settings. In addition she has spent the past ten years working with health care teams to develop online clinical documentation and capture workload in Meditech Magic. Brenda was born on Bell Island, Newfoundland (just a few short years ago) and currently lives in Courtice, Ontario. She is very happy to be coming home to the "Rock".

111 - Pharmacy Network Project in Newfoundland and Labrador

Presented by: Margot Priddle, Newfoundland and Labrador Centre for Health Information

Abstract: The Newfoundland and Labrador Centre for Health Information (NLCHI) has a mandate to develop a comprehensive, province-wide information system that securely provides accurate and current information to authorized users of the health and community services system.

The information system is called the Health Information Network and it supports an electronic health record (EHR) that will provide individuals with a secure and confidential lifetime record of their key health history and care.

The Pharmacy Network is a key component of the EHR and is the focus of Ms. Priddle's presentation. The Pharmacy Network will offer on-line, comprehensive, medication profiles as well as drug information and drug interaction information.

The first phase of the NL Pharmacy Network implementation will build the community pharmacy profile by linking all community pharmacies. The second phase will involve sharing the profile with the hospital systems and recording discharge medications within the network. The third phase will fully enable interactive functionality for physicians and other appropriate health care providers. During this latter phase, prescriptions will be able to e-prescribe into the NL Pharmacy Network in real time, at point of care.

The capability for physicians to e-prescribe and for pharmacists to e-dispense in a real time environment will enhance quality of care and patient safety and also make the health care system more efficient. A fully functional Pharmacy Network will prevent medication errors due to misinterpretation of hand-written orders and make medication choice more efficient as relevant information such as patient allergies, drug information, and clinical practice guidelines are available on-line and can be instantaneously updated.

Ms. Priddle will discuss these and other benefits along with an update on the progress of the design, development and deployment of this comprehensive, person-specific information system. Throughout the status report, the critical success factor of collaboration with provincial health stakeholders will be emphasized.

Presenter Bio: Margot Priddle Ph.C., B.Comm. - Margot is the Program Director for the Newfoundland and Labrador Pharmacy Network, at Newfoundland and Labrador Centre for Health Information. She has worked with The Centre for the last 6 years serving as the Business Leader and Subject Matter Expert for the various phases of the Pharmacy Network project.

Margot has a clinical pharmacy specialty in geriatric care pharmacy and before joining The Centre worked as a clinical pharmacist for Lawtons Drugs Nursing Home Services. She has been active in a number of pharmacy organizations and has served as President of both the Newfoundland and Labrador Pharmacy Board and the Canadian Society of Consultant Pharmacists. She is presently serving as Chair of the National Drug Scheduling Committee.

Her previous research experience includes co-investigator with "Impact of a Pharmacy Network on Adverse Drug Events in Hospitalized Patients", "Profiling Prescriptions Medication Utilization in Newfoundland and Labrador", and "Impact of a Newfoundland and Labrador Pharmacy Network on Community Pharmacy Practice."

303 – Physician Office Integration / IatricConnect Portal

Presented by: Julia Courtney, Iatric Systems

Abstract: With recent changes to Stark Law safe harbors, there has never been a better time for hospitals to help physician offices obtain Electronic Medical Record systems (EMRs) and integrate those systems with the Meditech HCIS. Iatric Systems offers two solutions that enable hospitals to help physician offices embrace IT. Come to this demonstration to learn more about these solutions: -Physician Office Integration (POI) – Provides uni-directional and optional bi-directional communication between Meditech and physician office EMR systems. Our experience in this area is second to none, having interfaced to over 45 physician office EMR systems, from well known systems (eClinicalWorks, NextGen, A4, Misys, etc.) to home grown ones. POI is a proven, mature product available to MAGIC and C/S sites.

-IatriConnect Physician Office Portal – For those physician offices without an existing EMR system, IatriConnect offers a cost effective, secure method of viewing a hospital's Meditech patient results via the Internet. It can be used by physicians who want to break free of the confines of PCI and customize the way they look at patient results. IatriConnect also helps hospitals compete with commercial laboratories by enabling physicians to access hospital patient lab results online at their practices.

Presenter Bio:

208 - Portal – “The Problem Solver” for Physicians, HIM and IT

Presented by: David Lewis, Valco Data Systems

Abstract: Portal technology continues to evolve, and is being used in more hospitals than ever before, by solving problems for Physicians, HIM departments and IT teams. Physicians are demanding easier and better ways of inter-acting with clinical data from multiple systems and are not happy with the current legacy approach. HIM departments are using Portal technology to improve processes around coding and work-list management and IT departments are using Portals to respond faster to user needs for Single Sign-on, aggregated and personalized views of data and new web-based functionality.

Progressive healthcare organizations are implementing portal solutions to provide a better user experience for Physicians and to prepare for regionalized healthcare sharing. Learn how portal technology has evolved and where it is headed. Understand how to make a Physician's life easier – where workflow and information needs can be easily met. Also learn from the experiences of many top hospitals in North America today on how they used Portal technology to solve other business problems and discover how this technology can be used to create new value for your Hospital Enterprise.

Presenter Bio: David Lewis is Director, Business Development at Valco Data Systems. During the last 5 years David has specialized in integration and Portal technology. He has worked closely with many hospitals and RHIO's to develop a clear understanding of what hospitals are looking for in electronic health records and how Portals can play a role in achieving this goal. David is a graduate of the Ivey School of Business, University of Western Ontario and has over 20 years of experience in Information Technology.

207 - Practical Project Management

Presented by: Roberta MacDonald, Beacon Partners

Abstract: Industry experts have estimated that IT projects fail 25 % of the time. This statistic does not include those projects that were over budget, exceeded their timelines, or simply did not meet the expected goals. When these statistics are considered in conjunction with the complexities of the health care environment today, where many facilities have over 20 concurrent IT projects, it is immensely challenging to ensure that projects are appropriately delivered. Many Healthcare IT professions claim they don't have time for the formal project management approach, however, the advantages of project management are better illustrated by listing the pitfalls of NOT using project management: excessive workloads for some individuals, cost over-runs, team members lack the right skills or expertise, staffing conflicts with other projects, strained relationships, work is redone or duplicated, insufficient resources, missed deadlines, scope of the project keeps changing, weak project execution. This session will walk the listener through a practical approach to Healthcare IT project management including the key steps and documents required to ensure your projects are delivered on time and on budget. The focus of the session will include scope and change control management, task management, project plan creation, and the essentials of team development.

Presenter Bio: Bio to follow

203 - Preparing for Success with Scanning and Archiving as Part of Your Information Lifecycle Management Strategy

Presented by: Denis Brideau, JJWILD

Abstract: The release of MEDITECH's Scanning and Archiving application has proved an exciting development for hospitals moving toward a paperless environment. For the first time, organizations can electronically capture and store information needed to create and maintain complete, legal charts using a system that is fully integrated with their HCIS. As is the case with any new system adoption, preparation is key to maximizing Scanning and Archiving's potential and to achieving early user satisfaction.

JJWild has partnered with MEDITECH to help ensure that customers who are planning to implement (or who have already begun implementing) Scanning and Archiving are set up for success. This session will review the most critical questions to answer before your implementation begins, including 'What are our hospital's short- and long-term goals for Scanning and Archiving?' – the answer to which will help determine the scope of the project. We'll also discuss other vital success factors like getting early physician buy-in, the need for proactive forms standardization and workflow process redesign, the importance of having experienced project management, and other technical requirements to support Scanning and Archiving today and in your organization's future. Finally, since Scanning and Archiving is only one component of a global Information Lifecycle Management plan, we'll address how this new tool fits in with your other data management, protection, and availability priorities.

Presenter Bio: Denis Brideau brings over 16 years of experience in Healthcare Information Systems, 13 of which have been MEDITECH. Prior to working for JJWild, Denis was IT Director at Beauséjour Health Authority in Canada. When the hospital he worked for became the headquarters for the Beauséjour Health Authority, he was responsible for the deployment of the MEDITECH suite of products in the other facilities. Denis has served as Chairperson on multiple internal power user groups and implementation teams. In 1996 and 1999, Denis served as Chairperson for the annual Medical Users Software Exchange (MUSE) conference for eastern Canada. In addition, he has managed conversions, optimizations, and scanning and archiving implementations.

214 - ROAM - Accessing Health Information and Applications Anywhere, Anytime

Presented by: Gary Russell, Huron Perth Healthcare Alliance & AnyWare Group

Abstract: Providing the information you need, when you need it: How one organization empowered its health care professionals with the freedom to access the information they need from anywhere at anytime. This presentation will outline how the Huron Perth Healthcare Alliance provided its staff and partners with access to Meditech and PACS from anywhere on the internet. PC and Mac users alike are able to access in the information and systems specific to their function within the organization without compromising ease-of-access or security.

Presenter Bio: Gary Russell, Operations Specialist, Huron Perth Healthcare Alliance

309 - Secure and Simplified Clinical Access – Considerations and Consequences

Presented by: Mike Knebel, Forward Advantage, Inc.

Abstract: In this session, attendees will review some of the practical problems incurred when trying to implement secure access and identity management technologies, and how to avoid these pitfalls. This pragmatic review demonstrates how a combination of technologies including enterprise single sign-on, proximity detection for "walk-up, walk-away" security, and biometrics for authentication can be combined to improve the quality and utilization levels of clinical computing resources.

Presenter Bio: Mike Knebel is the Vice President of Sales & Marketing for Forward Advantage, Inc. and has over 16 years of experience in the Healthcare industry including roles in Finance, Operations, Business Development and Information Technology.

310 - Sending Reports or Sending Data: Forward Advantage has the Answer

Presented by: Mike Knebel, Forward Advantage, Inc.

Abstract: Information Delivery takes many shapes, and from faxing reports to streaming data into a physician's EMR, every health care organization has its own unique set of requirements. As provider communities become more technologically diverse, it is more important than ever to provide a variety of methods to deliver information to physicians the way they need it, when they need it. This overview will detail how to give your provider community the most comprehensive set of delivery options, and discuss strategies for implementing and managing those options effectively and efficiently.

Presenter Bio: Mike Knebel is the Vice President of Sales & Marketing for Forward Advantage, Inc. and has over 16 years of experience in the Healthcare industry including roles in Finance, Operations, Business Development and Information Technology.

212 - Speech Recognition - Proven Healthcare Technology

Presented by: Jake Cormier, Lanier Healthcare Canada

Abstract: Traditionally viewed as simply a means of dictating text into a personal computer, today's speech-recognition solutions plays a far more significant role in the healthcare environment. In addition to pure dictation, speech-recognition software can be used to manage e-mail, streamline repetitive tasks on the PC, reduce transcription and charting costs, speed up information turnaround, and protect employees from repetitive stress injuries (RSIs).

The technology can be integrated with most electronic medical record (EMR) applications to make those programs more effective and easier to use. Rapid hardware advancements and improvements in the technology itself have increased its utility, accuracy, speed, and ease of use. This has brought the cost of ownership to an affordable level for medical departments and even entire hospitals. Like any technology, the deployment of a speech-recognition program needs careful planning so as to achieve the full benefit of the technology and maximize the return on investment.

Presenter Bio: Over 20 Years experience as System Specialist in Medical & Legal dictation and Document Management solutions. Working with Speech Recognition systems since 1999 and was part in the implementation the first Canadian Healthcare Speech Recognition system in 2002. Lanier Healthcare Canada has now provided speech recognition solutions to numerous hospitals across Canada, some interfaced to their hospital Meditech HIS systems. See Lanier website for further information: www.lhcc.ca

311 - StreamTask: DTS+ for Client Server Hospitals

Presented by: Ted Molloy, Array Software

Abstract: Now Client Server facilities can enjoy the same benefits that more than 200 MAGIC sites have enjoyed for years. StreamTask is a web based application that converts MEDITECH documentation into succinct tasks accessible on a site's Intranet or from anywhere over the Internet. Organized by application and assignee, project members organize their testing and familiarization efforts using key words. Instead of printing piles of paper, users note progress or problems, identify Pre-Live issues and change statuses online. IT meanwhile has real time access to the progress the team is making as a whole or individually. If you're looking for a better way, please stop by and take a look.

Presenter Bio: Ted Molloy has been supporting Array's clients for 15 years now. Participating in sales, implementation and support for all three of Array's products, Ted spends much of his time working directly with users. By being in the hospital itself, Ted continues to witness the cultural changes that have encouraged health care to be more business like in its practices. Prior to joining Array, Ted spent considerable time in both manufacturing and financial services where he gained experience in project management, process improvement and workload measurement. Ted recognizes that there are plenty of people out there who are experts in providing quality healthcare; he hopes that he can help hospitals make it more affordable.

113 - Strategic Directions in Information Management in a Regional Health Authority

Presented by: R. James Brown/ Debbie Whalen, Eastern Health

Abstract: In cross-continuum regional health authorities, one of the critical success factors in realizing the opportunities in improving health services and in gaining operational efficiencies is effective information management. To this end, Eastern Health has established a regional Information Management Committee (IMC). The presentation will provide an overview of the IMC membership/representation, information management strategic planning and accountability processes. The Eastern Health experience with this model in dealing with accreditation, regional consolidations and clinical initiatives will be discussed.

Presenter Bio: R. James Brown BSc MBA, Director Health Information Services and Informatics (HIS&I)- Eastern Health (EH), has wide-ranging experience in health care operational management, planning, research and information management. Debbie Whalen CHIM, Manager Informatics HIS&I, has extensive experience in health information management and the relationship to IT. She manages the HIS&I services in Rural Avalon in EH.

116 – Telehealth Project in Eastern Health

Presented by: Joanne Reid, Eastern Health

Abstract: TBA

Presenter Bio: TBA

213 - Threat Risk Analysis - It's not that hard

Presented by: Paul Keys, Computer Engineering Associates, Inc.

Abstract: This session will provide an understanding of the processes for Meditech users to creating a Threat Risk Analysis (TRA). A discussion of the standards used for an assessment and analysis will be presented.

The guidelines to be followed in the creation of a TRA will include the published standards from the RCMP, TSSIT, and NIST. Since not all standards will apply directly at each facility, information on what needs to be included in your analysis will be presented.

At the conclusion of the session, attendees will have a better understanding of the elements and data that should be incorporated into a TRA, and the value of this analysis for management, auditors, and compliance officers.

Who should attend? Attendees will receive an overview of some of the methods used to create a Threat Risk Analysis (TRA), which is customized for their facility. IT Directors, Compliance Officers, CIOs, CFOs, and individuals responsible for their internal infrastructure, security, or risk analysis should attend this session.

Presenter Bio: Paul Keys, President and CEO of Computer Engineering Associates, Inc. (CEA) has been involved in security, compliance, audits, assessments, data centre planning, migration, consolidation, and disaster recovery in the Meditech community for over 20 years. Mr. Keys has a degree in electronics engineering and numerous IT certifications. He is involved in the daily operation of CEA and works with disaster recovery planning and security related issues. He has taught classes on hardware maintenance, installation, networks, and HIPAA (security) compliance. Mr. Keys works with customers and the engineering staff of CEA to address compliance officer and auditor issues in an IT environment, with a specific focus on security, data integrity, and recoverability to protect a facility from legal or compliance issues.

107 - Transforming Physician Ordering with Sharepoint Services – the Little Project that Grew

Presented by: Kathy Fraser, Lakeridge Health

Abstract: Two years ago, oncologists at the Durham Regional Cancer Centre at Lakeridge Health handwrote outpatient prescriptions that walked out the door in the hands of the patient to be filled at community pharmacies outside the hospital. Care providers had limited knowledge of what medication orders had been written for the patient and the retail pharmacies had often-illegible orders requiring clarification by the ordering physician. A trial of physician-generated outpatient prescriptions using the native physician order entry (POE) functionality embedded in Meditech's PCI was conducted and the outcome was successful. Building on this, the program began a trial of physician-generated chemotherapy orders with patient-specific, regimen-specific, BSA-based dose calculations. This was a major improvement to our previous practice in terms of patient safety, but was still in the end a paper-based process. In preparation for opening of the cancer centre in the spring of 2007, the project was expanded to replace the paper with an electronic version of the order and employ Microsoft Sharepoint services to route the order from physician to pharmacy and nursing staff, and ultimately to the patient's chair side. We will share details of the solution, demonstrate its functionality, and share key lessons learned along the way.

Presenter Bio: Kathy Fraser has worked in healthcare IT since 1991, with experience implementing and supporting information systems in long term, chronic, mental health and acute care facilities. In her most recent role as Manager of IT for the R. S. McLaughlin Durham Regional Cancer Centre at Lakeridge Health, Kathy and her team have brought this experience to bear in implementing a number of innovative solutions to make the best of the investment in the hospital's Meditech system and more recent technologies such as Microsoft Sharepoint in the recently-opened cancer centre.

112 - Using Medinet - Lab to Lab Requisitions and Results

Presented by: Lynn Wade, Eastern Health

Abstract: The laboratory at the General Hospital site, Eastern Health implemented Medinet as a means of improving the transfer of laboratory information between referring laboratories within the province and the laboratory at the General Hospital. This presentation will describe how the Laboratory at the General Hospital site, Eastern Health reduced data entry error and improved result reporting turnaround time using Medinet. It will take you through some of the obstacles that had to be overcome as well as describe issues that arose as a result of the initiative.

Presenter Bio: Lynn Wade has been a practicing Medical laboratory Technologist for 30 years. Following 20 years as a bench technologist in various laboratory disciplines, she began a career in laboratory management as Client Services Manager for the laboratories of the former Health Care Corporation of St. John's, now part of Eastern Health. Lynn completed a Bachelor of Technology at Memorial University in 2005 and recently accepted the position as Program Manager, Safety & Quality Management, Medical Services & Diagnostics. As Client Services Manager she oversaw the implementation of Medinet between the former Avalon Health board as well as Western Health.

103 - Workflow Analysis: Not An Afterthought!

Presented by: Larissa Wisniewski & Linda Yetman, Bridgepoint Health

Abstract: Healthcare organizations invest significantly in electronic clinical documentation systems with objectives which aim to enhance patient safety and quality of care as well as improve clinical decision making and data collection. These implementations may not achieve these objectives for various reasons. A common contributing factor is omitting workflow analysis and redesign that identifies where improvement opportunities lie, risks exist, and ultimately how the system will be used, where and by whom.

Workflow analysis and redesign is a critical element to a successful implementation - one which will be embraced by end users. Without this important step, organizations may end up automating their current redundant processes and even introducing new unwanted inefficiencies without capitalizing on the opportunities for improvement.

The importance and applicability of workflow analysis was realized at Bridgepoint Hospital as they work towards their goal of implementing electronic Order Entry and Clinical Documentation. Bridgepoint Hospital recognized the need for workflow analysis to ensure the system they built did not replicate any inefficient and redundant clinical processes.

Team members involved in performing the analysis require strong clinical skills, coupled with an ability to analyze processes from an external perspective. The methodology involved uses qualitative and quantitative methods. The current clinical processes will be documented and reviewed with working groups devised of system design team members, and clinical and administrative representatives. Team members with knowledge of the application, best practices and workflow will provide Bridgepoint Hospital with design options and recommendations that will best meet the needs for each specific clinical environment. Conducting a workflow analysis as a component of planning for electronic clinical documentation leads to a better planned and thorough implementation that will have a much higher chance of success and clinical adoption.

Purpose/Objectives of Presentation: The content of this presentation will demonstrate the importance of including a thorough workflow analysis process into Order Entry and Clinical Documentation planning for successful clinical transformation and adoption. Methodology and preliminary findings will be shared.

Presenter Bio: Larissa Wisniewski and Linda Yetman are the Co-Leads on the Electronic Clinical Documentation Project at Bridgepoint Health, a major complex care/rehabilitation healthcare setting in Toronto, Ontario. Both have strong clinical backgrounds (Speech Pathology and Nursing, respectively) as well as clinical applications expertise.