MEDITECH

# Surveillance Collaborative

July 31, 2024

# Key Points

- Surveillance Enhancement: Create a way to Add Cumulative Number query responses for the Fact Dict Lookback period
- Microbiology Procedure Prompt integration with EHR
- Roadmap: Resuscitation Status Surveillance Data Field
- Signature and Valley Surveillance Alert Messages
- Physician Champion: Helps identify key areas where quality meets surveillance
- Surveillance in the Web

# MEDITECH

## VISION

Advance digital health record technology so every patient and their providers can access their health information and participate in their care. We believe every healthcare organization can better serve its community with open access to electronic health records, clinical knowledge, and data.

## MISSION

Enable global healthcare organizations to deliver safe, efficient, and impactful care to the communities they serve through our comprehensive software, services, and technology

## VALUES

Integrity

Investing in the future: people, process, and technology

Sustainability and focus

Fiscal responsibility

Ensuring a positive long-term impact on customers, staff, and the industry

**Our solutions drive organizations to improve efficiency; guide clinical, financial, and operational decisions; and connect clinicians across a dynamic healthcare ecosystem in support of holistic, person-centered care.**

# Surveillance Collaboration

## Our Mission

To incorporate **Surveillance** throughout healthcare organizations. To **enhance safety practices and access to information**. The Surveillance Collaborative Forum will serve as subject matter experts and provide guidance, recommendations, and conceptualization on Surveillance Best Practices through the use of MEDITECH software and provide feedback for the future design of the Surveillance application.

# Our MEDITECH Members

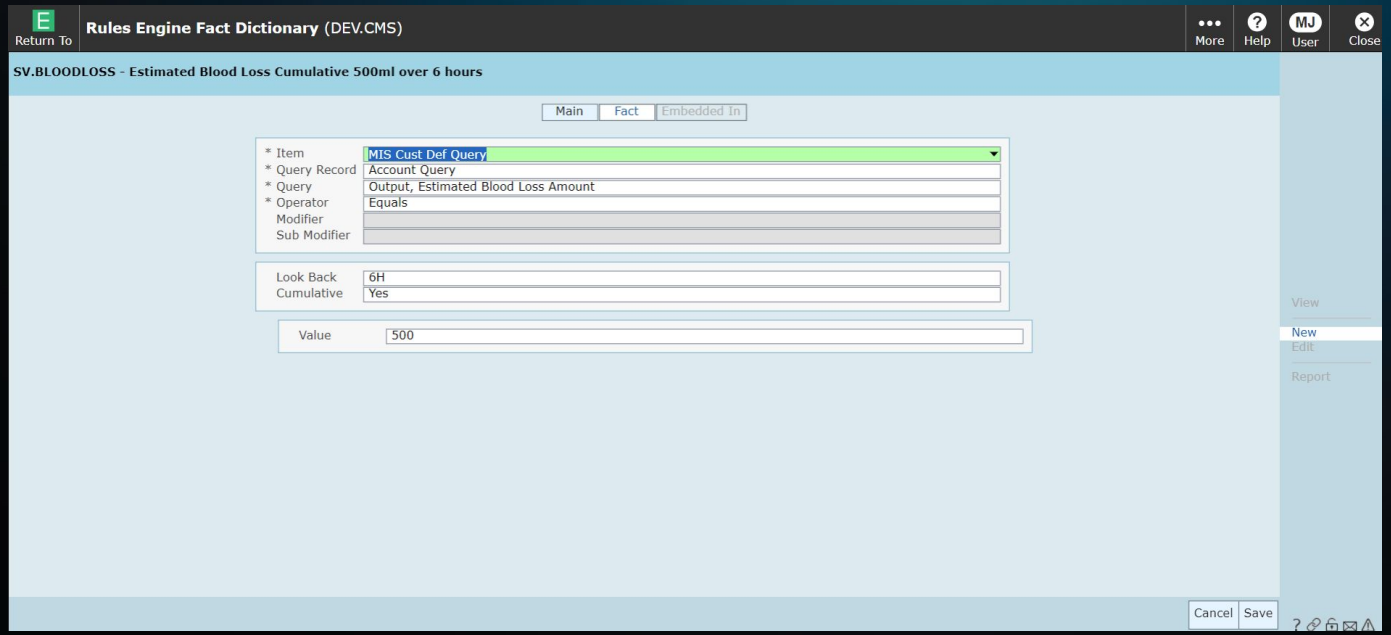
- Daniel Seltzer, Quality & Toolkits
- Gregory Ayers, HCA Surveillance
- Brett Muirhead, MaaS Implementation
- Jennifer Ford, Strategy Division
- Jonathan Hallman, Client Services
- Jonathon Junker, Client Services
- Ilana Gutierrez, Implementation
- Israel Perez, EMT Client Services
- Scott Gooch, Development
- Spencer Dolan, Development
- Larissa DeGregorio, Client Services

# Our Client Members

- Signature Healthcare, MA
  - Nicholas Szymanski
  - Christopher Mitchell
  - Dee Dee Johnson
  - Jeff Gray
- Holyoke Medical Center, MA
  - Avadhoot Gokhale
  - Christi Giroux
  - Brian Stromwall
  - Debbie Lajoie
  - Debra Marum
  - Tara Garstka
- Citizens Memorial
  - Sherry Montileone
  - Cherilyn Michaelis
  - Michelle Williams
  - Katrina Mawhiney
  - Chad Cahow
- Frederick Health, MD
  - Jackie Rice
  - Lauren Small
  - Debbie Remsberg
  - Lisa Ledwell
- Golden Valley Memorial Healthcare, MO
  - Hayli E. Wade
  - Kaytie Stockdall
  - Kim Bybee
  - Nancy Engeman
- Valley Hospital, NJ
  - Michael Burke
  - Christopher Neumann
- Heywood Hospital, MA
  - Jaime Vallejos
- Royal Victoria Regional Health Centre
  - Sharon Avey, RN, MN
  - Shelli Hickey
  - Christianna Howes
- Logan Health, MT
  - Pebbles Bates
- Thibodaux Regional Health, LA
  - Ashley Becnel
  - Michelle Toups
- HCA, TN
  - Stefanie Fine
  - Kayla Johnson
  - Ricardo Gonzalez
- Unity Health
  - Ann Russell
- Broadlawns Medical Center
  - Jeanne Dobrzynski

Development

# Adding up with **MEDITECH Surveillance**

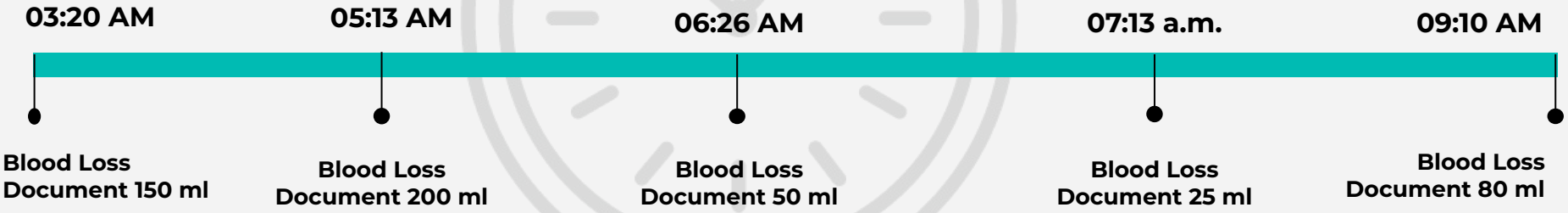



## CM-23419

Surveillance: Create a way to Add Cumulative Number query responses for the Fact Dict Lookback period

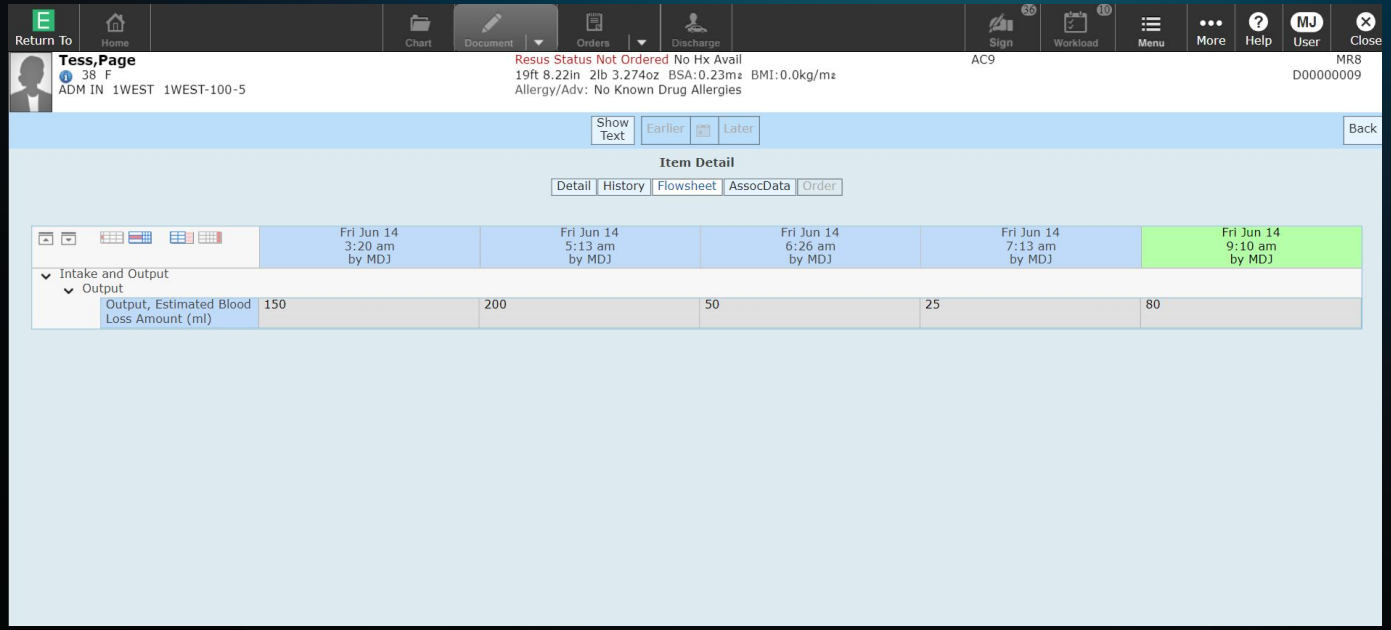
# Example | Blood Loss

**Blood Loss fact: Estimated Blood Loss Cumulative 500ml over 6 hours**




Surveillance will “Look Back” 6 hours and add up the documentation to 500 ml over

# Adding up with **MEDITECH Surveillance**



**CM-23419**

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Surveillance: Create a way to Add Cumulative Number query responses for the Fact Dict Lookback period

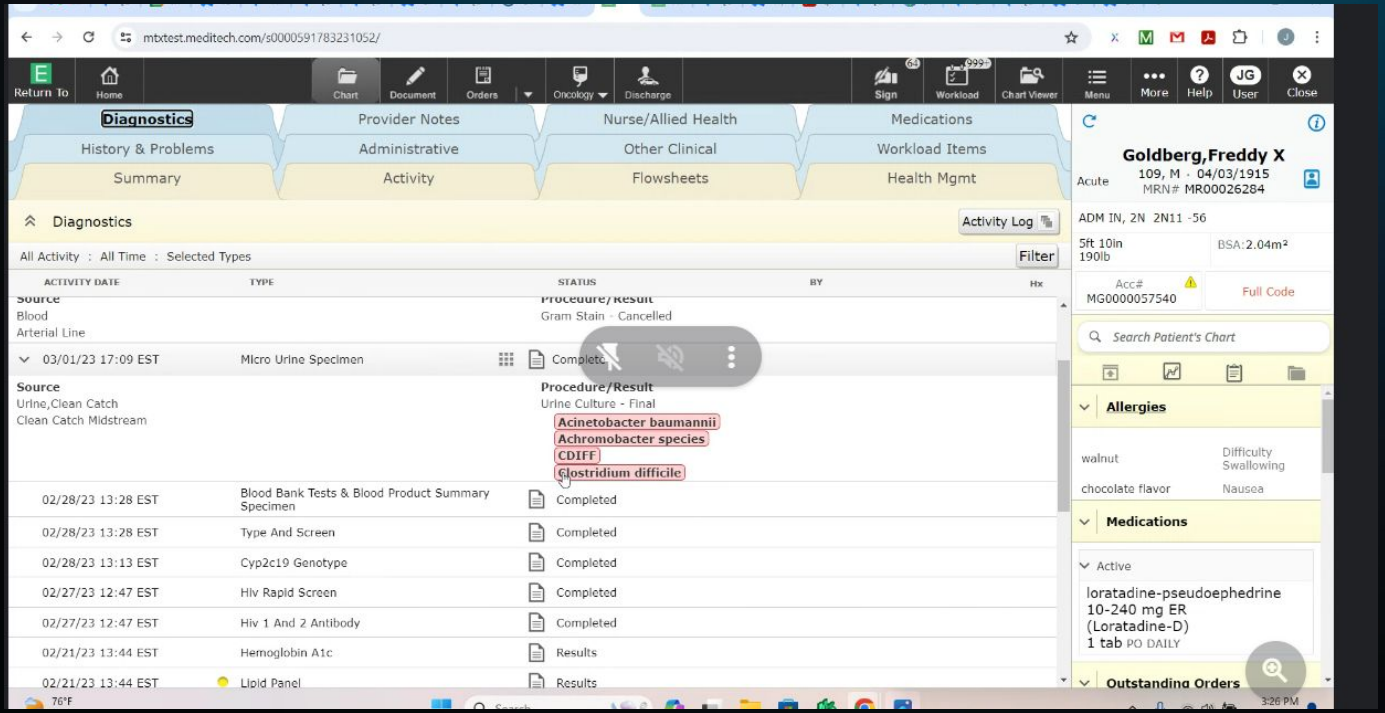
# Microbiology Result

## CM-23686
**Add Data Item for EMR MIC Results for Surveillance Facts**

In progress: Road map 2024

| Name | Mnemonic |
|---|---|
| EMR MIC ProcPromptAbFlag | EMRACCTMIC.MICROPROCPROMPTABNFLAG |
| EMR MIC ProcPromptName | EMRACCTMIC.MICROPROCPROMPTNAME |
| EMR MIC ProcPromptResTxt | EMRACCTMIC.MICROPROCPROMPTRESULTTEXT |
| EMR MIC ProcPromptUnits | EMRACCTMIC.MICROPROCPROMPTUNITS |

# Microbiology Result




Epic:
CHART-41660
Microbiology Procedure Prompt integration

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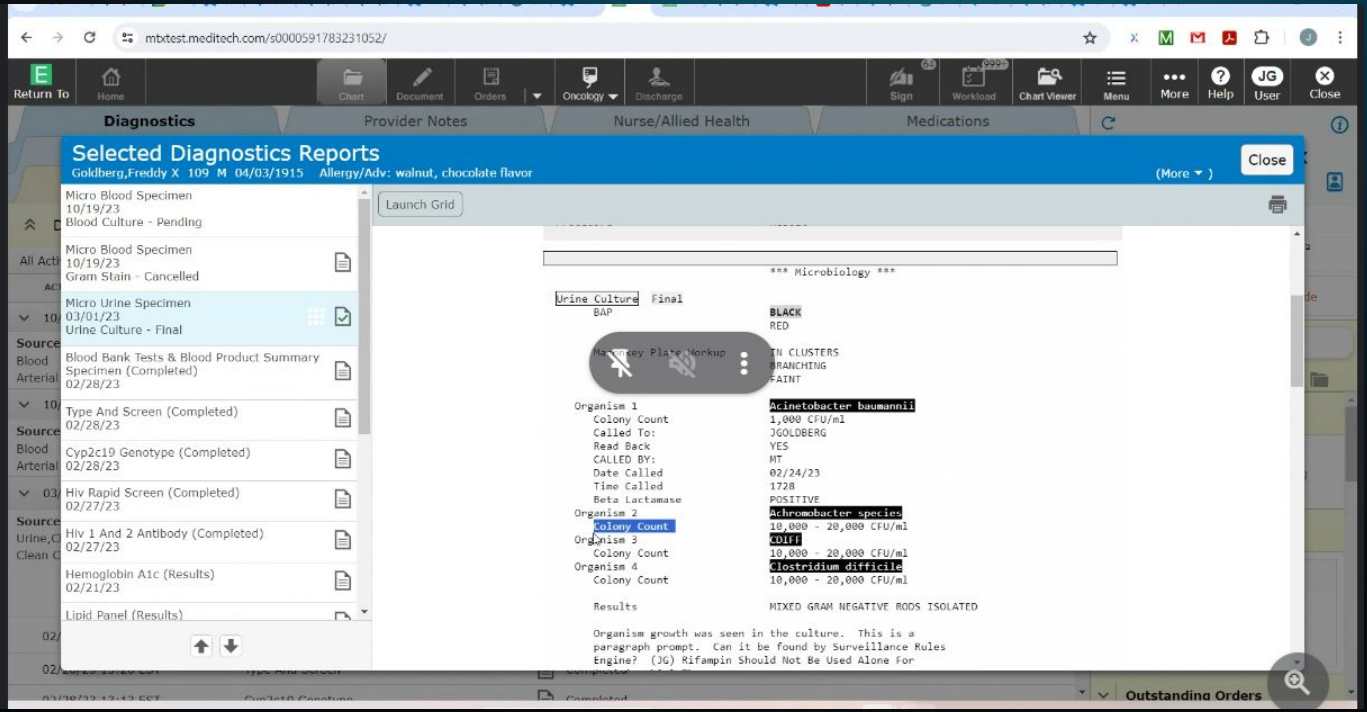
# Microbiology Result



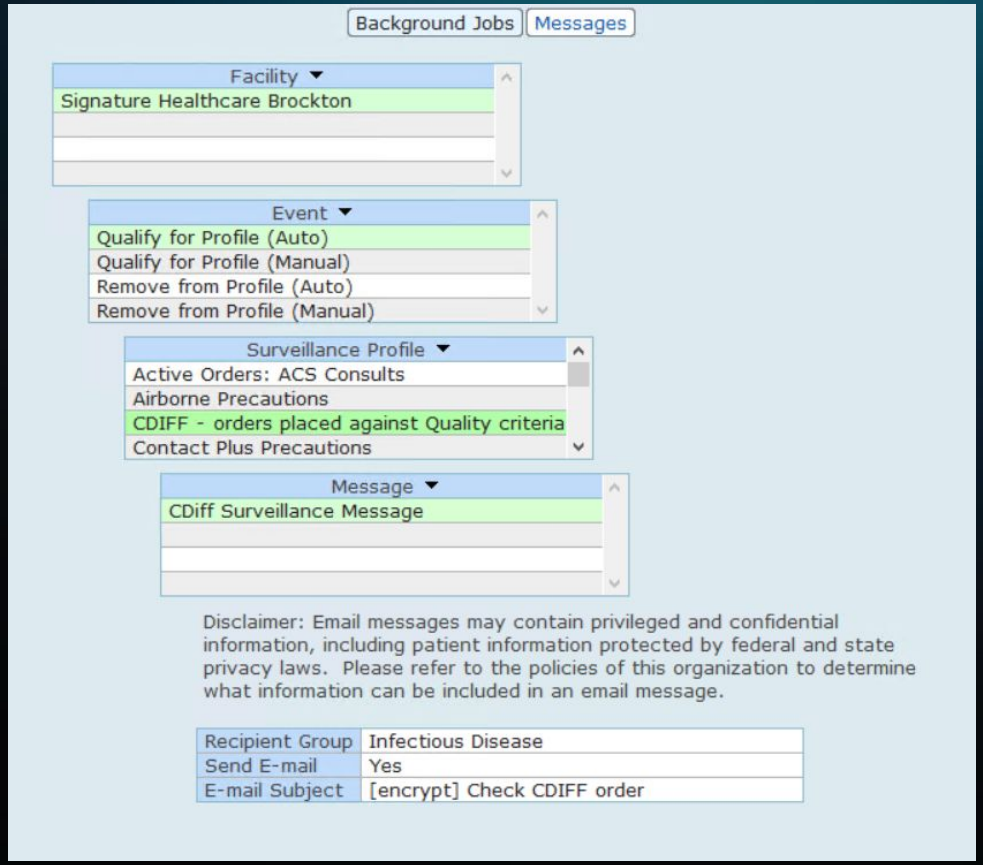

Epic:
CHART-41660
Microbiology
Procedure Prompt
integration

# Resuscitation Status Roadmap 2025

IDEA-26432: Add Data Item in Rules Engine Fact dictionary to reference Resuscitation Status field in OM

# Surveillance Messaging

# Signature Healthcare




## C Diff Alert Messages

### Surveillance Parameters Messages

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Automatic Message will send to Infectious Disease

# Signature Healthcare

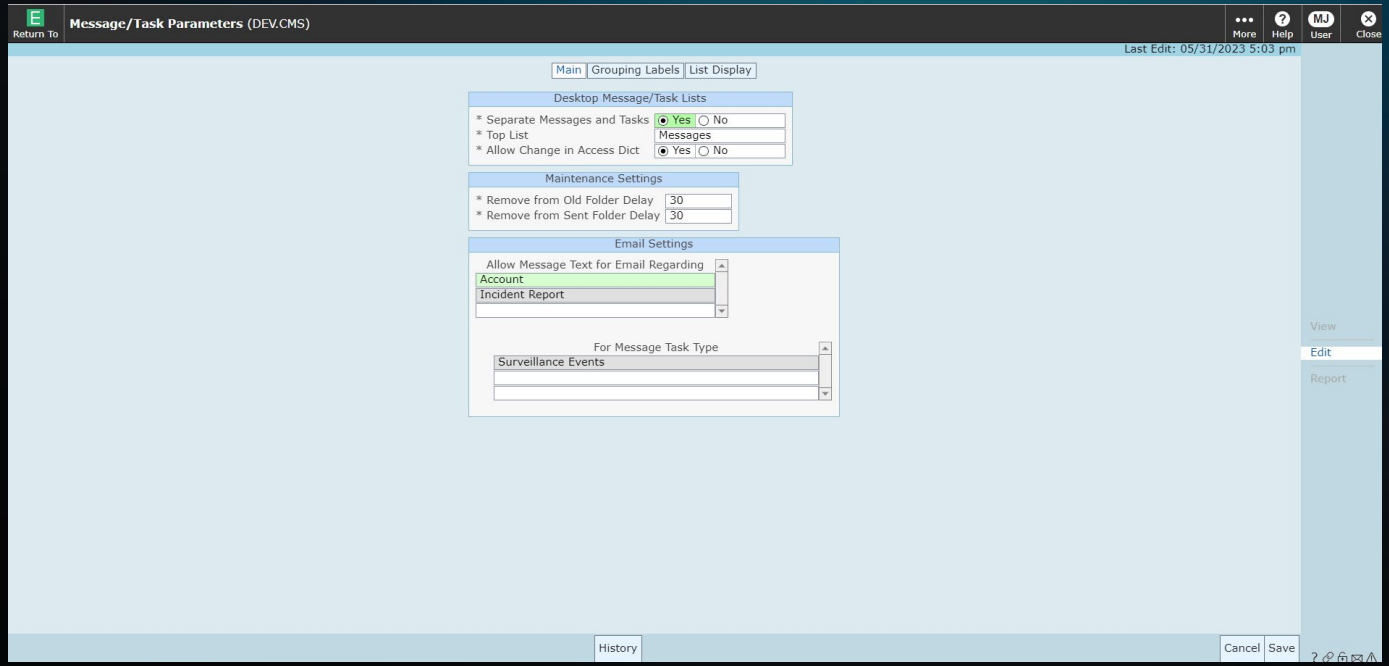
## Email Example

-----Original Message-----
From: SystemMsgDoNotReply@Signature-Healthcare.org [mailto:SystemMsgDoNotReply@Signature-Healthcare.org]
Sent: Sunday, March 21, 2021 8:34 PM
To: Mitchell, Christopher; Greenberg, Robert M.D.; Arshad MD, Saarah; Ryan, Stacey J; Ferreira, Vincent
Subject: [encrypt] Check CDIFF order

An Order for CDiff has been placed that does not meet typical Quality criteria.
Please review:

Pt Name Redacted
Pt Acct # Redacted
REG ER
Emergency Dept Observation
Attending Provider:
Reg Date/Time: 03/21/21 14:41

# Surveillance Alert Messages




## Message/Task Parameters

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Email including details from the messages

# Valley Hospital

- Messages email to Informatica
- Informatica reads the message looking for keywords (HL7)
- Vocera communicates the message to the nurses care team system phones

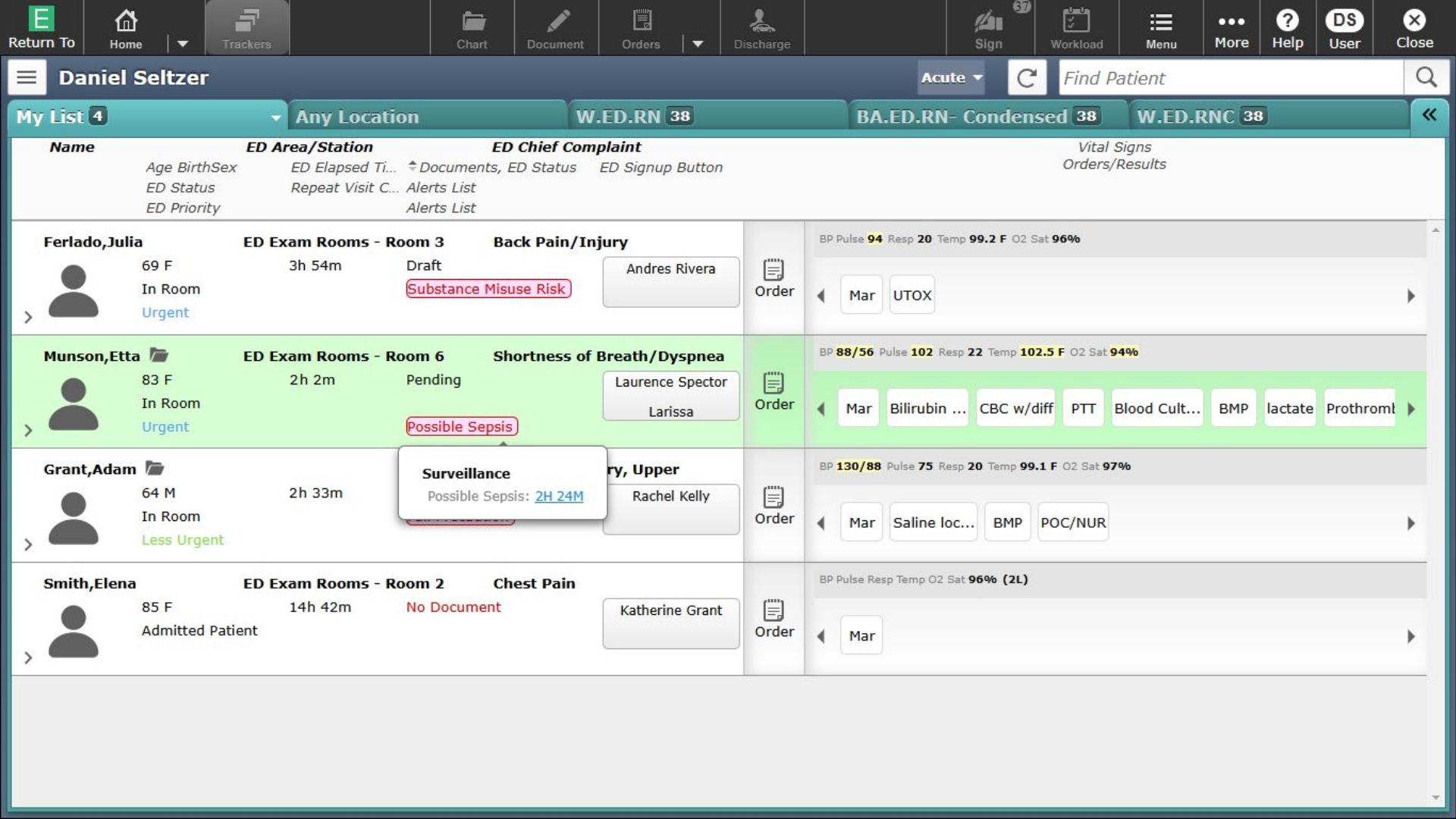
# Surveillance for Providers

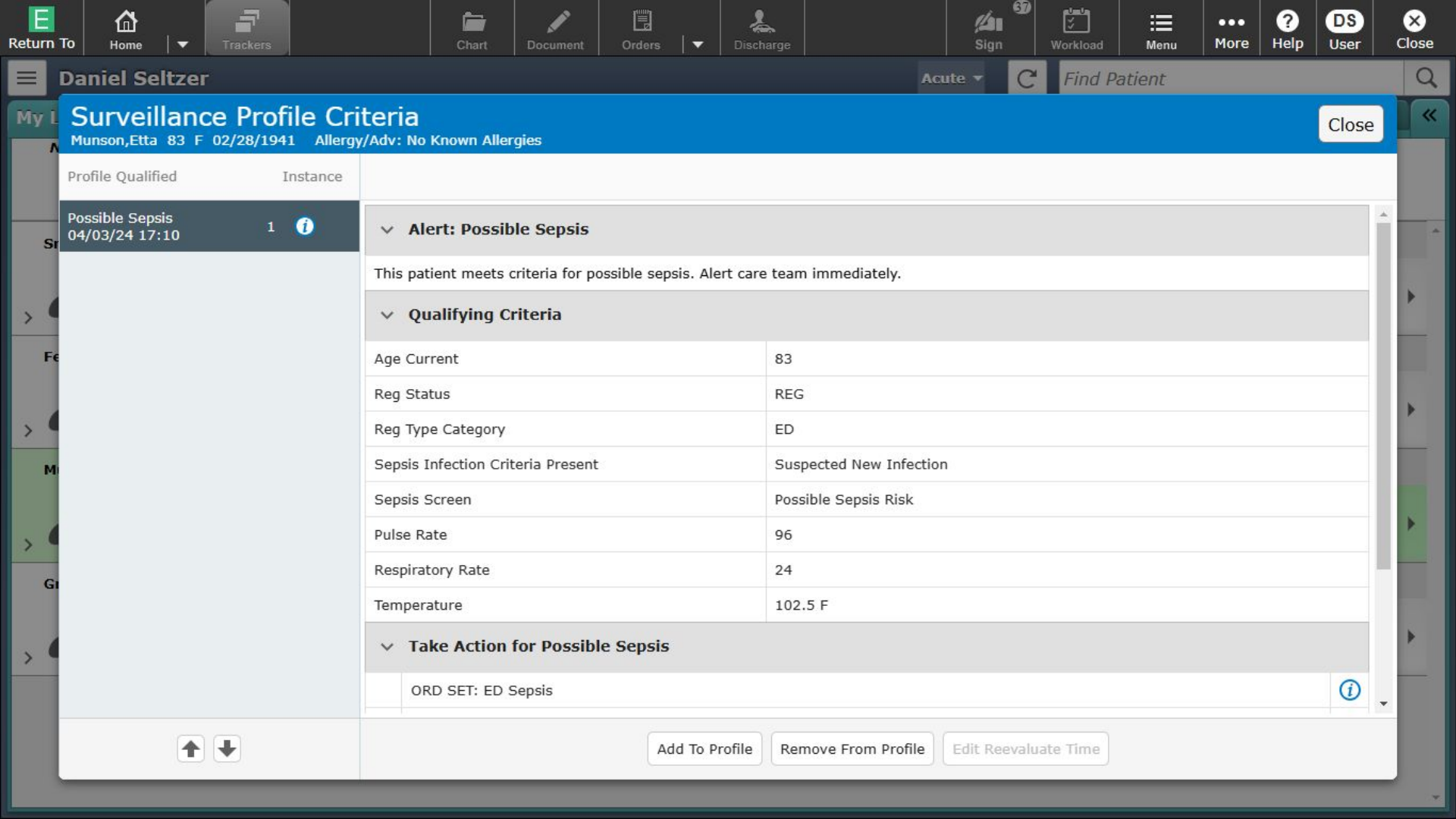
# Physician Champion

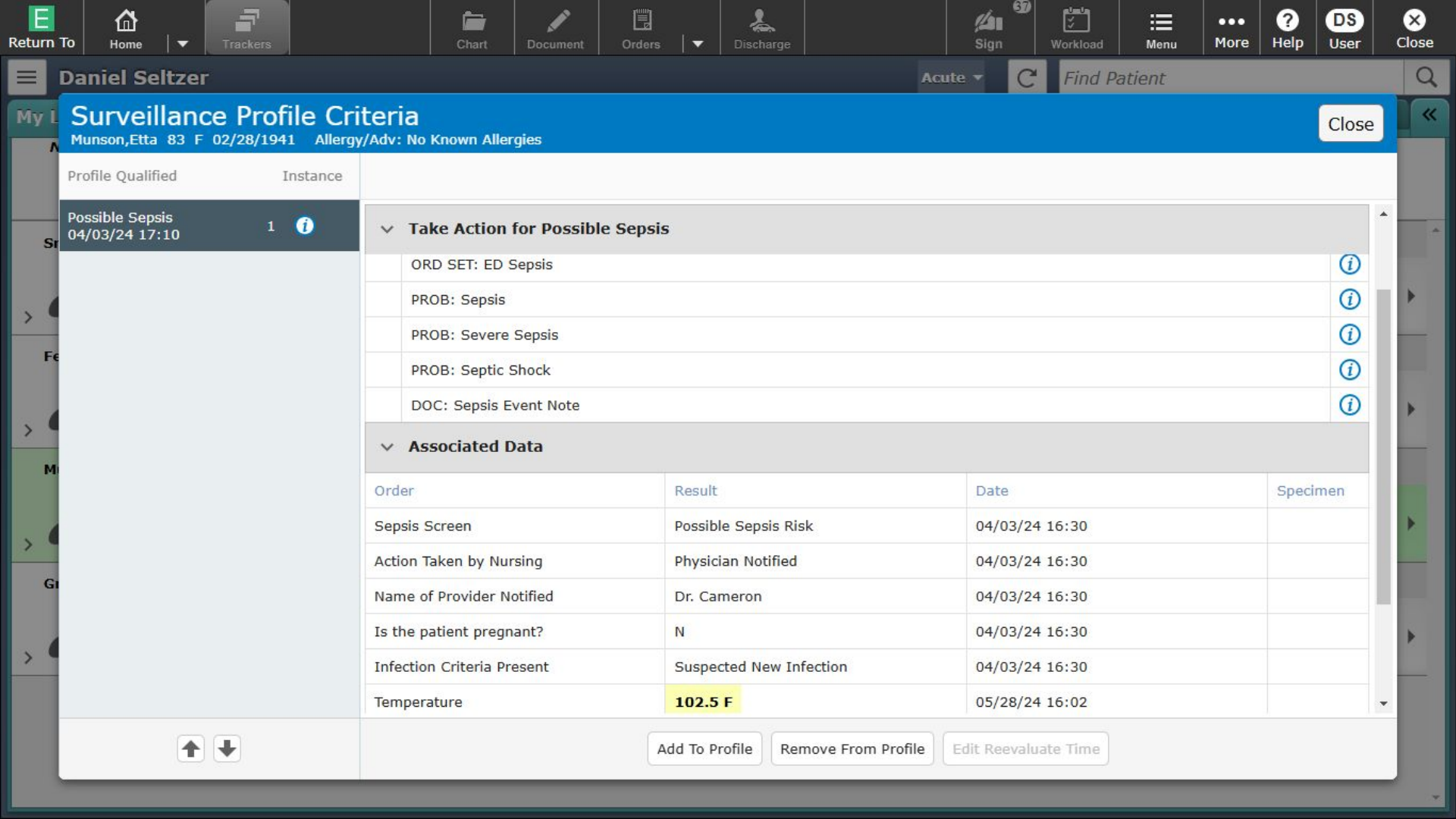
- Creates a collaborative environment between IT and Physicians
- Insight to Physician unique workflows
- Communication
- Facilitate adoption
- Helps identify key areas where quality meets surveillance.
- “Boots on the ground” physician leaders

# Surveillance Alert Options

| Alert Type | Data Item | Display Singular | Display Multiple | Considerations |
|---|---|---|---|---|
| Alerts List | Surveillance Profile Elapsed or Qualified Date/Time | C-SSRS | High Fall Risk, CAUTI, ABX: 48+ .... | These should be reserved for the most urgent details; Define a concise label for each alert. |
| Alerts Icon | Surveillance Profile Elapsed or Qualified Date/Time | | | Clinicians must clearly understand what type of alert the icon represents, because one icon represents all qualifying Profiles associated to it. |
| Indicator | Indicator Scheme Text or Icon Indicators | U Cath<br>SEPSIS<br> | High Fall Risk<br>SEPSIS<br>U Cath >2D | For icons, clinicians must clearly understand what types of alerts coincide with each icon. |
| Surveillance Profile Elapsed Date/Time | Surveillance Profile Elapsed Date/Time | Urinary Catheter > 2 D<br>5H 47M | Urinary Catheter > 2 Days<br>4H 7M<br>. . . | Passive indicators for informative details that may still require action or physician attention, but are not urgent. |
| Surveillance Profile Qualify Date/Time | Surveillance Profile Qualify Date/Time | Urinary Catheter > 2 D<br>10/24/19 10:21 | Urinary Catheter > 2 Days<br>10/24/19 10:21<br>. . . | |


Return To
Home
Trackers
Chart
Document
Orders
Discharge
Sign
67
Workload
Menu
More
Help
DS
User
Close
Daniel Seltzer
Acute
Find Patient
My List 4
Any Location
W.ED.RN 38
BA.ED.RN- Condensed 38
W.ED.RNC 38
Name
ED Area/Station
ED Chief Complaint
Vital Signs
Orders/Results
Age BirthSex
ED Elapsed Ti...
Documents, ED Status
ED Signup Button
ED Status
Repeat Visit C...
Alerts List
ED Priority
Alerts List
Ferlado,Julia
ED Exam Rooms - Room 3
Back Pain/Injury
69 F
3h 54m
Draft
In Room
Substance Misuse Risk
Andres Rivera
Urgent
Order
BP Pulse 94 Resp 20 Temp 99.2 F O2 Sat 96%
Mar
UTOX
Munson,Etta
ED Exam Rooms - Room 6
Shortness of Breath/Dyspnea
83 F
2h 2m
Pending
Laurence Spector
Larissa
In Room
Urgent
Possible Sepsis
Order
BP 88/56 Pulse 102 Resp 22 Temp 102.5 F O2 Sat 94%
Mar
Bilirubin ...
CBC w/diff
PTT
Blood Cult...
BMP
lactate
Prothrombi
Surveillance
Possible Sepsis: 2H 24M
Grant,Adam
64 M
2h 33m
In Room
Less Urgent
Rachel Kelly
Order
BP 130/88 Pulse 75 Resp 20 Temp 99.1 F O2 Sat 97%
Mar
Saline loc...
BMP
POC/NUR
Smith,Elena
ED Exam Rooms - Room 2
Chest Pain
85 F
14h 42m
No Document
Admitted Patient
Katherine Grant
Order
BP Pulse Resp Temp O2 Sat 96% (2L)
Mar


Return To
Home
Trackers
Chart
Document
Orders
Discharge
Sign
67
Workload
Menu
More
Help
DS
User
Close
Daniel Seltzer
Acute
Find Patient
Surveillance Profile Criteria
Munson,Etta 83 F 02/28/1941 Allergy/Adv: No Known Allergies
Close
Profile Qualified
Instance
Possible Sepsis
04/03/24 17:10
1
Alert: Possible Sepsis
This patient meets criteria for possible sepsis. Alert care team immediately.
Qualifying Criteria
Age Current 83
Reg Status REG
Reg Type Category ED
Sepsis Infection Criteria Present Suspected New Infection
Sepsis Screen Possible Sepsis Risk
Pulse Rate 96
Respiratory Rate 24
Temperature 102.5 F
Take Action for Possible Sepsis
ORD SET: ED Sepsis
Add To Profile
Remove From Profile
Edit Reevaluate Time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Workload
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Close
Daniel Seltzer
Acute
Find Patient
Surveillance Profile Criteria
Munson,Etta 83 F 02/28/1941 Allergy/Adv: No Known Allergies
Close
Profile Qualified
Instance
Possible Sepsis
04/03/24 17:10
1
Take Action for Possible Sepsis
ORD SET: ED Sepsis
PROB: Sepsis
PROB: Severe Sepsis
PROB: Septic Shock
DOC: Sepsis Event Note
Associated Data
Order
Result
Date
Specimen
Sepsis Screen
Possible Sepsis Risk
04/03/24 16:30
Action Taken by Nursing
Physician Notified
04/03/24 16:30
Name of Provider Notified
Dr. Cameron
04/03/24 16:30
Is the patient pregnant?
N
04/03/24 16:30
Infection Criteria Present
Suspected New Infection
04/03/24 16:30
Temperature
102.5 F
05/28/24 16:02
Add To Profile
Remove From Profile
Edit Reevaluate Time

# Color Coding Alerts

**Options Include:** Aquamarine, Blue, Cyan, Green, Magenta, Orange, Sapphire, Tan, Violet, and Wheat

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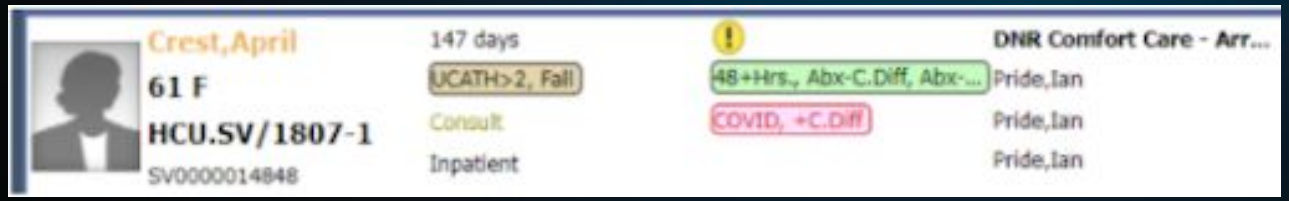
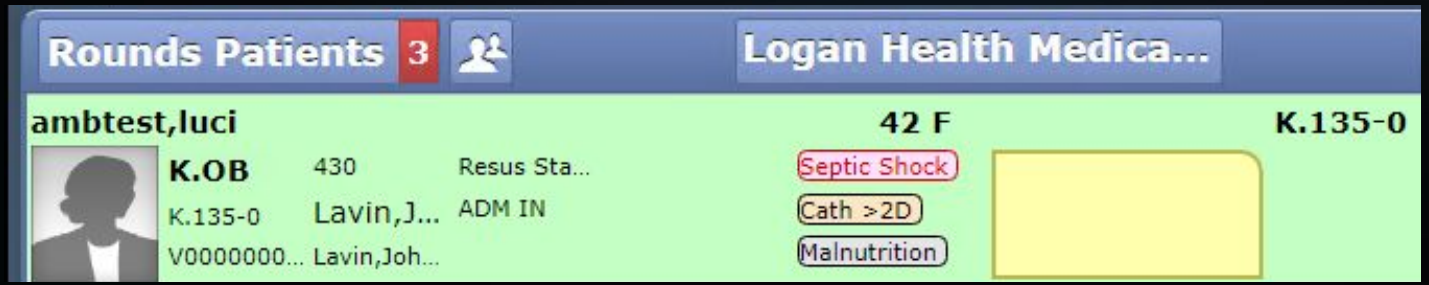
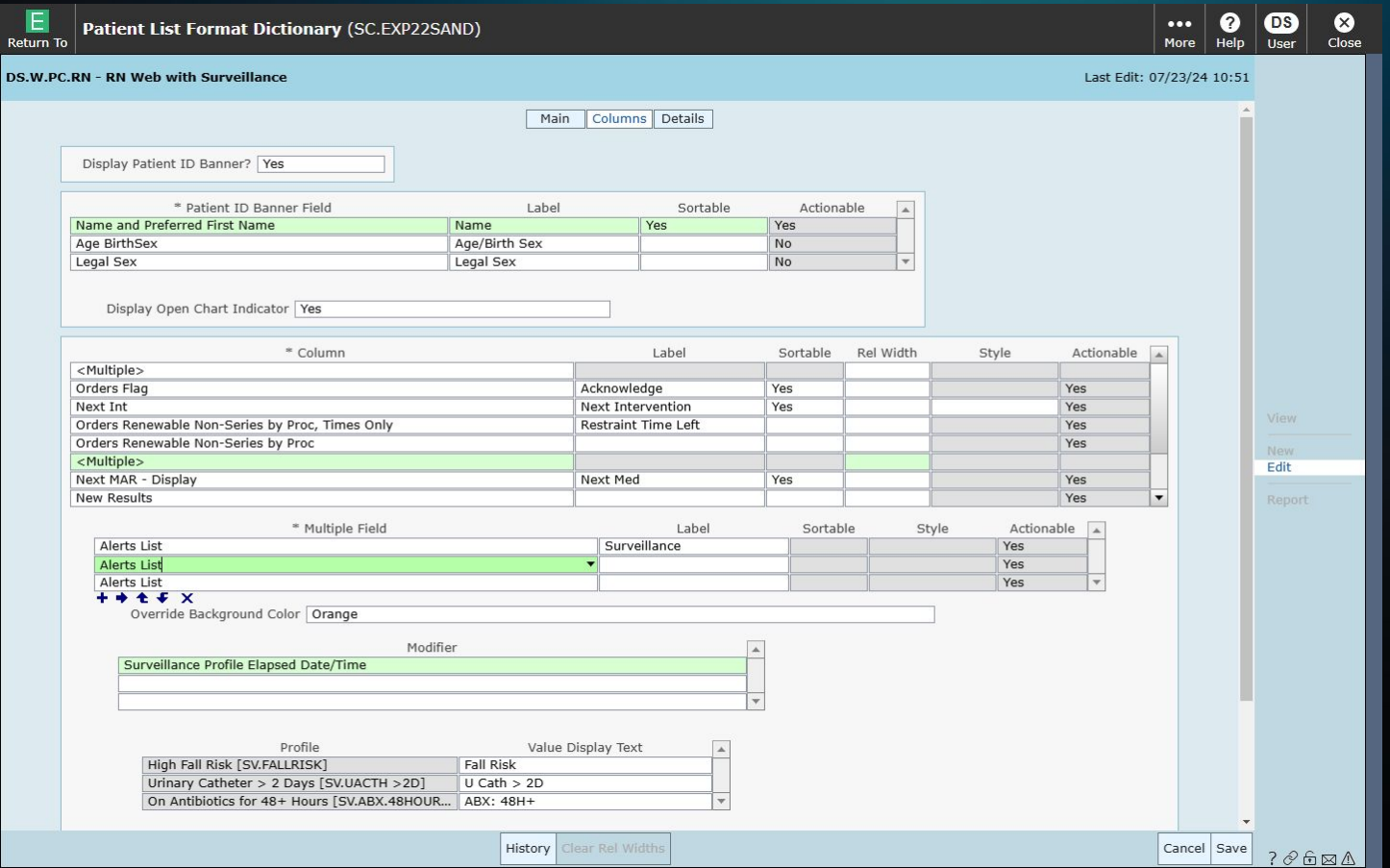
MEDITECH Example:




Logan Health Example:



# Dictionary Setup - Color Coding




## Alert List

- Elapsed Date/Time
- Override Background Color
- Profiles

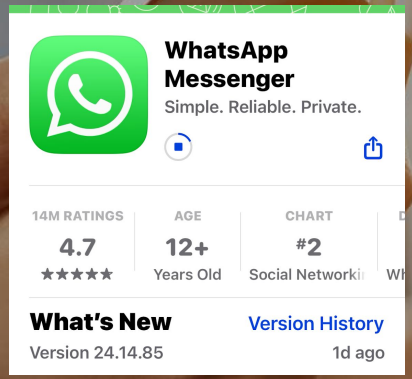
# Surveillance Collaboration Communication

# *What's App* CPAC Chat Group

**Marsha Fearing, MD, MPH, MMSc.**
***Physician Consultant, Region 3***

# Need for Internal Peer-to-Peer Group Discussion Group:

# Key Points of Interest:




- **Security and Encryption: End to End (Comfortable sharing screen shots)**

  *WhatsApp-Security-Whitepaper.pdf*

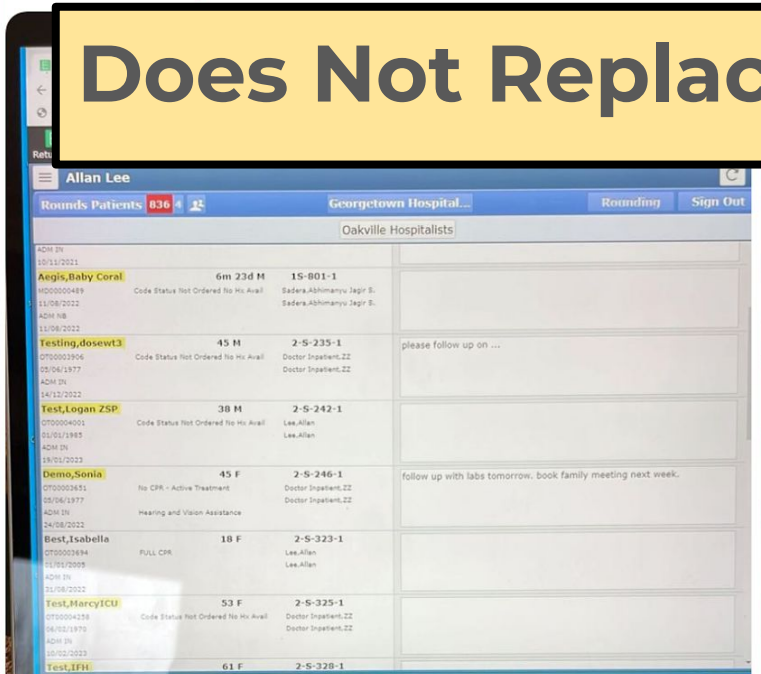
- **No additional fees to call US to Canada**
- **Desktop vs. Mobile Phone usage**
- **Easy to Moderate; up to 256 members**

13:32

CPAC Chat Group
Allan, Amyeen, Andrea, Dere...

16:20

Allan Lee, MD




**Does Not Replace Client Services!!**

13:20

CPAC Chat Group
Allan, Amyeen, Andrea, Dere...

Dr. Tasleem Nimjee

> Allan Lee, MD
> Different topic. My GI guys are asking to

ours. They collaborate very well. I can't remember offhand what are set up is, but I believe we have third party software like you described.

21:34

Allan Lee, MD

@Dr. Tasleem Nimjee I was just asked to look at AIMS as well

## Topic: Successful Builds

> What has been the most effective surveillance project your organization has done & why?

Holyoke Medical Center

**Chris Giroux**
Director of IS/IT
Holyoke Medical Center

Thank You!

# Resources

Customer Showcase Recordings and Resources:
https://customer.meditech.com/en/d/prwqm/pages/qmebfesurvshowcase.htm

Surveillance Collaborative Page:
https://home.meditech.com/en/d/customercollaboration/pages/surveillancecollaborative.htm

Style Guide
https://customer.meditech.com/en/d/prwqm/otherfiles/qrmeiassurvalertstyleconsiderations.pdf

Collaborative Solutions
https://home.meditech.com/en/d/newmeditech/pages/collaborativesolutions.htm