



IHealth

Go-Live News

For Staff @VGH/GRH/SISC

Monday, September 23



Quality Practice Hub team members connect at Go-Live on Sunday. Back L-R: Yingbo Hogeweide, Sarah Erickson, Ho Gale, Pratyush Sharma. Front L-R: Andrea Bowden, Pam Loadman and Casey Tremblay. See story below

In today's Go-Live News:

- [Quality Practice Hub's diverse expertise allows for quick problem solving](#)
- [Read the Clinical Adoption Key Messages](#)
- [Neuro Rehab team not taking any shortcuts and finding success](#)
- [HCAs seeing workflow streamlined with CPOE at GRH](#)
- [Pro-tip for keeping vital signs monitors connected to Wi-Fi](#)
- [Spotlight Q&A: Meet Tracy Appleton-Hill](#)
- [Support at the elbow, on desktop & remote](#)
- [Key Links](#)

Quality Practice Hub's diverse expertise allows for quick problem solving

The Quality Practice Hub (QPHub) was created to ensure quality and safety are always considered during CPOE activations. During Go-Live at VGH/GRH/SISC, QPHub team members have been rounding to all units to check in with clinical staff on how things are going.

The QPHub includes Professional Practice, Clinical Learning, Digitally Enabled Practice, Quality Improvement, Patient Safety, Patient Quality and Concerns Office, Office of Experience, and Medication Safety.

Melina Kason, in her role as professional practice director of digitally enabled practice, says the QPHub rounding is not just about CPOE – it's about how care providers are practicing within the new electronic health record (EHR) environment. "History, habit, or tradition may have dictated a 'way of being' and processes, but the EHR and the work done to prepare for this activation is to ensure evidence-based practice in providing quality and safe patient care. The Quality Practice Hub is less about the tool, and more about quality practice and how we work in a digitally enabled environment."

Andrea Bowden, professional practice director of allied health, says the QPHub supports a quicker and more streamlined process for identifying and responding to emerging practice, safety, and quality issues, providing clinical staff with a multi-faceted, collaborative response. Follow-up on Patient Safety Learning System issues can be done in the moment to address issues in workflow or practice. "With rounding, clinical staff are not getting pinged by as many different people having to retell their story. We have people rounding together and getting the perspectives and story all at once, and problem-solving together."

Read the Clinical Adoption Key Messages

Click to read Clinical Adoption Key Messages

Topics:

- Admission Medication Reconciliation (Providers and Clinicians)
- Medication Administration Documentation by Ordering Providers (Providers and Clinicians)
- Minimizing Distractions During Medication Administration (Clinicians)

Neuro Rehab team not taking any shortcuts and finding success

“We’re a small but mighty team. We’ve been educated and prepared for CPOE, and we’re feeling pretty good to go,” Sherry Campbell, CNL, explained, as we caught up with the Neurological Rehabilitation unit 5N one week into Go-Live.

“During the roll-out, it’s been amazing to be fully staffed,” Sherry said, adding that staffing levels have visibly helped build confidence, allowing the team time and capacity to work through unique patient scenarios — before they occur.



Sherry Campbell, CNL in the Neurological Rehab unit

This is but one of the support strategies that has allowed for success with things like medication and patient scanning within the unit. “Our medication scanning has been good. We’re not taking any shortcuts, and we’ve been getting pretty good stats.”

The transition has not been without trials. In Neurological Rehab, patient discharge planning is often in-depth. “Patients aren’t discharged quickly here,” LPN Becky Billings explained. “It usually takes a minimum of four to six weeks.” Discharge planning is complex with the addition of CPOE.

Despite several unit-specific challenges, staff in the unit can see the benefit that CPOE poses for patient safety and efficiency: “I actually like scanning the wrist bands because I’m not constantly second guessing myself,” said Janice Miller, LPN.

With the first week down, Becky summarized her feelings, and perhaps those of her front-line colleagues: “Apart from the fact that I forget the steps sometimes... I’m dealing!”

HCAs seeing workflow streamlined with CPOE at GRH

Health-care aides (HCAs) at Gorge Road Health Centre (GRH) are experiencing workflow improvements with the recent implementation of CPOE.

Titto Jose, manager at GRH, gives an example of the changes in their workflow. “Now, when HCAs apply cream and they notice a skin rash, they can immediately record it in the system instead of writing it on paper. It greatly improves our ability to track and respond to patient conditions.”



Anne-Marie Ugirumurera, a health-care aide at GRH

“Sometimes when you’re working on a patient on one side of the building, but the papers you need to sign are on the other side,” said HCA Anne-Marie Ugirumurera, highlighting how CPOE prevents information loss. “This sometimes causes errors because we’re dealing with multiple patients and can forget to record some items. Now, it’s all there in one click.”

Navjot Kaur, a casual HCA, appreciates the enhanced access to patient information between shifts. “You can easily check the records you need. You don’t need to wait for the nurse to tell you.” This is particularly beneficial for Navjot, as her irregular schedule previously required digging through paper records from her last shift.

While acknowledging challenges, Titto remains optimistic. “We’ve got this. It drastically improves the quality of care we’re delivering. The pain of growing, the pain of learning is worth it.”

Pro-tip for keeping vital signs monitors connected to Wi-Fi

Over the weekend, some staff were reporting that vital sign monitors (VSMs) were losing

connection to the Wi-Fi. If this happens, the device integration team advises that you turn the machine off and on again and check it is connected to the Wi-Fi. Vital signs are not lost when you do this – they are retained for download.

Spotlight Q&A: Meet Tracy Appleton-Hill

Name: Tracy Appleton-Hill

Role: Cerner Adoption Coach

Area Supporting: Gorge Road Health Centre; also supported Victoria General Hospital yesterday

From: Cleveland, Ohio

Previous Activations: Royal Jubilee Hospital, multiple VA hospitals across the United States over 10 years

What is a benefit of IHealth/CPOE you would like to highlight? The computerized system is a better way to track patients' medications system-wide, and you can do that from hospital to hospital with the computerized system.

Key advice for Go-Live: "If they can make pizza out of cauliflower, this will be a breeze."

Where can we find you outside of work? I enjoy exploring local food places and often go to the "Red Fish Blue Fish" restaurant. I also went to Vancouver to shop and have done some whale watching.

Support at the elbow, on desktop & remote

Find support when and where you need it during Go-Live. If you need help or have a question, reach out 24/7 to support staff on your unit, use the "Band-Aid" tool at the top of your screen to get help, or call IHealth Central Support at 1-855-755-7001 or 28555.

Key Links

- [IHealth Intranet](#)



- [Communicating about IHealth with Patients, Clients and Families](#)
 - [Orders Management Intranet page](#)
 - [What's Changing – By Roles](#)
 - [See more photos: IHealth Go-Live Photo Gallery on Flickr](#)
-

www.IHealth.islandhealth.ca



*Copyright © Island Health | IHealth
For internal use only.*