

Choosing the right devices for the Clinical & Systems Transformation

The mission of CST's Device Team is to ensure that staff have the right device in the right place at the right time to embrace new ways of working and to access the new clinical information system.

Front line staff often ask the CST team: "How can we provide care effectively using electronic records with only one computer shared between eight nurses, a unit clerk and a physiotherapist?" In fact, it will require more than the standard desktop and laptop computers.



"Devices are just tools to enable patient care. We're giving options to provide access to devices so care providers can do bedside documentation electronically, or do closed loop medication administration, and not be competing for resources," explains John Meaney, RN, CST Clinical Device Lead.

Devices include workstations on wheels, medication delivery carts, barcode scanners, label printers, laser printers, document scanners and tracking boards, to name a few.

Device Catalogue

What devices will clinicians need to do their work efficiently and effectively? Which are easiest to use in a clinical setting, bearing in mind the tasks care providers need to complete? Which makes and models will provide the best value, be most reliable, and be adaptable to work well for a range of specialties? These are some of the questions the Device Team asked when creating a list of devices for the catalogue. Answering them involved more than 500 tests over two weeks, with 70 participants from 40 clinical disciplines, who traveled approximately 10km with mobile carts and performed over 8,600 barcode scans.



“We hope we’ve given enough choice and created enough adaptability in the device catalogue that we can enable access effectively in most scenarios,” affirms John.

The device catalogue will be used in planning for procurement at each site.

Site Device Assessment and Consultation Services

“Our second objective is to provide site assessment and consultation services to hospitals and clinics, and help them design a way of deploying devices that works best for their local needs, based on the catalogue of options,” says Raymond Chau, former CST Device Team Lead. “Every facility is going to have different space and building infrastructure constraints. Device selection cannot be a shrink-wrapped solution. It’s not realistic to have a prescribed device list and expect it to work for every site.

“We have formed a Clinical Device Advisory Group with representation from the physician and nursing communities, pharmacy, patient safety, human factors – a broad membership across VCH, PHSA and PHC to assist us in current and future management of the catalogue and our services.”

The team is performing careful site assessments at each facility well before devices are purchased and deployed. They assess power availability, network connectivity and other key considerations such as space and infrastructure.

“Working on-site at Lions Gate and the Sea to Sky facilities, the first group to implement these changes, gave the Device Team an opportunity to engage with both direct care and managerial staff,” said Donna Stanton, former CST Executive Director and Transformation Lead, VCH. “This allowed the team easier access to clinical areas, enabled informal information-gathering, established trust in the Device Team’s process and approach to the site assessment, and ensured that staff’s needs and suggestions were heard.”

For more information, please contact John Meaney, RN, CST Clinical Device Lead, at JMeaney@providencehealth.bc.ca.

Background information

The Clinical & Systems Transformation project is a joint initiative of three health organizations: Vancouver Coastal Health, Provincial Health Services Authority and Providence Health Care. The project is designed to transform health care delivery systems and processes to improve the safety, quality and consistency of the patient and caregiver experience. CST will support the health organizations in establishing common clinical and process standards, including workflows, order sets, clinical guidelines integrated plans of care and a common electronic health record. This clinical transformation will be supported by the implementation of a clinical information system that will replace aging existing systems. The project will be implemented in stages across the health organizations.

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