> " CST is not something that will happen to us. It's a tool that we all get to shape. It will help us deliver safer, more efficient and more consistent patient care. "

Elizabeth Stanger
Executive Director,
CST Site Implementation
VCH-Coastal

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Mission Statement

Our mission: to transform the way care is delivered in our health organizations by improving patient safety, reducing unnecessary work, increasing consistency of care, providing better information and improving system reliability and sustainability.

Our Future

A connected health system that works – for our patients and the people who care for them.

What is the Clinical & Systems Transformation?

The Clinical & Systems Transformation (CST) is a joint initiative of three health organizations: Vancouver Coastal Health (VCH), the Provincial Health Services Authority (PHSA) and Providence Health Care (PHC). The CST 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 existing aging systems.

The project will be implemented in stages across the health organizations. Find out more at CSTproject.ca or contact us at info@CSTproject.ca.

What's Coming?

▶ Health professionals across VCH, PHSA and PHC will adopt common clinical and process standards, including workflows, order sets, clinical guidelines and integrated plans of care.

▶ Patient records will be updated and shared electronically via a shared clinical information system.

▶ Medications and other instructions will be entered directly into the information system and will immediately become part of the patient's record (computerized provider order entry).

▶ Health professionals in acute care facilities across VCH, PHSA and PHC will use a fully electronic 'closed loop medication management' process. This will help improve patient safety by making sure each medication is prescribed and given to the right patient, in the right dose, at the right time, with the right documentation.

> " CST is the right thing to do. It will offer patients and those of us that care for them more up-to-date, in-the-moment communication than we've ever had before. "

Karin Olson
Chief Operating Officer,
Coastal Community of Care
VCH

About the New Clinical Information System

A clinical information system is a computer system designed for collecting, storing, amending and retrieving information relevant to health care delivery. As part of CST, a new system will be implemented to consolidate patient data from over 50 current systems into one electronic health record.

What this means for health professionals:

» An electronic patient chart – no more searching for the chart, writing orders on paper, or deciphering handwriting.

» Easy-to-access information about the patient's condition, allergies, medications and previous medical history.

» Ability to see a patient's chart while they're still in the Emergency Department, before they have arrived on a hospital unit.
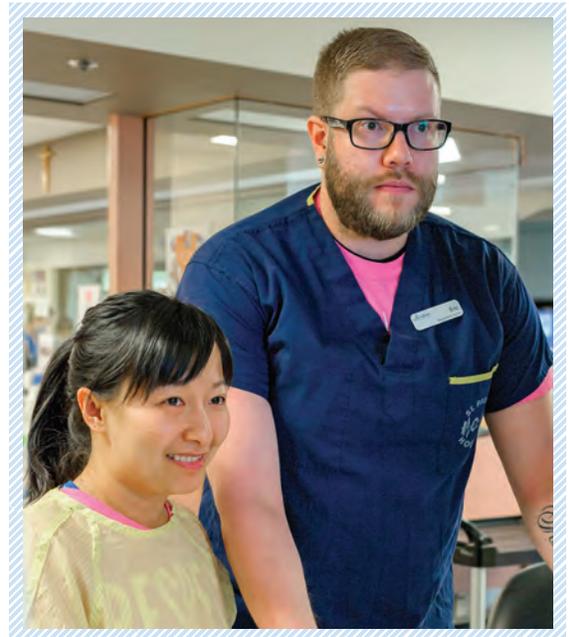
Education and Training

Staff, physicians, students and non-employees who are impacted by CST will receive education prior to implementation of the new clinical information system.

Education will be based on roles and workflows, and there will be an opportunity to practice before transitioning to the new clinical information system. A variety of learning approaches will be provided to support multiple audiences with different needs. Users of the system will attend a combination of self-paced online learning sessions and specialized classroom training.

Formal education delivery will typically start about 6-8 weeks prior to the implementation of the new clinical information system. This education will be complemented by hands-on practice with the new system, both in and out of the classroom, as well as tools and resources to support education on the unit before and after the go-live periods. New clinical policies and practice changes will further support the clinical transformation and build a foundation for supporting staff through the change.

On-site User Support

During the implementation period, various teams will be on-site to provide support and training as needed at the point of care. These teams will consist of unit-based "peer support," CST educators, and application support specialists. They will have the skills and expertise to answer questions, and to provide technical expertise and at-the-elbow support to staff and providers during the critical period after the new system is implemented. The team will be supported by "Command Centres" with experts available to resolve any issues that arise.

As staff become familiar with the new system and workflows, the support model will transition into a stabilization period to ensure staff are supported before, during and after the change.

Project Drivers

CST is our path to smarter, seamless care. These drivers set the standard for measuring our performance:

Patient Safety First
Reduce errors and adverse events

From timely access to information, to barcode scanning of medications, to better care planning, we're investing in a safer future.

Best Way, Every Day
Improve quality and consistency of care

We are designing safe, efficient care pathways that reflect the latest evidence and will reduce unnecessary variations in care across our facilities and health care organizations. These changes will be supported by a culture of continuous learning and quality improvement.

Face Time, Not Chase Time
Improve the health care experience for patients and care teams

When care teams have the information they need at their fingertips, it means more time for patients. Transitions across health care settings will be smoother; everyone will be on the same page. Care teams won't have to ask the same questions over and over or repeat tests.

Draw on Data
Make better information available to improve decision-making, research and proactive care

Fuller, richer information will give us a clearer picture of how we're doing and where we can improve across health disciplines and organizations. Data will be used to anticipate the needs of at-risk populations and individuals today, and inform plans that will benefit the patients of tomorrow.

Strengthen our Core
Improve system reliability and sustainability

Right now, we use over 200 systems and programs. Many of our outdated systems will be replaced with one clinical information system, which will connect with other key systems. This will improve the stability of the systems our clinicians are using, enable us to enhance their functionality, and reduce costs over the long term.

CST Goals

These are the key goals that, if achieved, will signify that the CST project has been successful. This list does not include all intended outcomes of the project.

Drivers	Goals
Patient Safety First	• Reduce medication-related adverse events • Reduce non-medication-related adverse events
Best Way, Every Day	• Improve delivery of evidence-based care
Face Time, Not Chase Time	• Reduce time to therapy • Reduce non-value added activities • Improve information sharing and participation with patient and families at transitions of care and care planning
Draw On Data	• Inform health system management and quality improvement with better and more accessible data • Improve availability of high quality and readily accessible data for research • Enable proactive care for at-risk individuals and populations
Strengthen Our Core	• Improve reliability/stability of the technical environment • Reduce clinical information system maintenance costs

Approach and Timeline

The current Design/Configuration/Validation/Testing phase of the project is expected to last until late 2017, followed by a period of intense planning and preparation in advance of implementation at each group of health care facilities.

Among the first major changes associated with CST is the establishment of a new Vancouver Pharmacy Production Centre (VPPC) at Vancouver General Hospital, which automates the packaging and distribution of prescription medication in unit dose format to facilitate CST's closed-loop safe medication management processes. The VPPC is a foundational component for CST implementation at all sites, and began operating in fall 2016.

The first group of sites, which includes Lions Gate Hospital, HOpe Centre, Evergreen House, North Shore Hospice, Squamish General Hospital, Hilltop House, Pemberton Health Centre and Whistler Health Care Centre, is targeted for implementation in 2018. Group 1 will also include Radiology at Sechelt Hospital, Bella Coola General Hospital and RW Large Memorial Hospital in Bella Bella. CST will be implemented at groups of facilities over the next several years. The BC Cancer Agency will be the second group.

Even before the VPPC starts up and the clinical information system is implemented at the first group of sites, staff and physicians will begin to see evidence of the transformation through the introduction of standardized workflows and order sets in care settings across VCH, PHSA and PHC.

CST Facts

CST will be implemented at 35-40 facilities, including:

» 3,416 acute beds
» 2,148 long-term care beds
» Tertiary/quaternary academic teaching hospitals
» 8+ provincial referral services
» Community hospitals
» Residential care
» Primary and community care integration services

…and will affect over 35,000 staff, including roughly:

» 11,100 nurses
» 5,800 physicians
» 3,400 clerical staff
» 3,200 care assistants
» 2,800 allied health staff
» 1,900 researchers and students
» 600 lab staff
» 500 health information management staff
» 400 pharmacy staff
» 400 managers
» 3,600 other staff

Locations*

Banfield Residence

BC Cancer Agency,
inc. regional cancer centres, satellite clinics
and community oncology network clinics

BC Children's Hospital,
inc. child and youth mental health

BC Women's Hospital inc. Heartwood
Women's Centre

Bella Coola General Hospital

Brock Fahrni Pavilion

*Burnaby Centre for Mental Health
and Addiction*

Cedarview Lodge

Diamond Centre (ambulatory)

Dogwood Lodge

Evergreen Extended Care

Evergreen House

Forensic Psychiatric Services

George Pearson Centre

GF Strong Rehabilitation Centre

Hilltop House

Holy Family Hospital

Honoria Conway Residence

HOpe Centre

Kiwanis Care Centre

Lions Gate Hospital

Looking Glass Residence

Mary Pack Arthritis
(inc. clinics in Cranbrook, Penticton,
Vancouver and Victoria)

Minoru Residence

Mount Saint Joseph Hospital

North Shore Hospice

Pemberton Health Centre

Powell River General Hospital

R.W. Large Memorial Hospital (Bella Bella)

Richmond Hospital

Richmond Lions Manor

Sechelt Hospital

Squamish General Hospital

St. John's Hospice

St. Paul's Hospital
inc. seven community dialysis units

St. Vincent's Langara

Sumac Place

Sunny Hill Health Centre

UBC Hospital inc. Koerner and
Purdy Pavilions

Vancouver General Hospital

Whistler Health Care Centre

Willingdon Creek Village

Youville Residence

*Please note this list is subject to change. Locations in italics are not fully confirmed.

More Information

CSTproject.ca
info@CSTproject.ca

Dr. Eric Grafstein
Chief Medical Information Officer, VCH/PHC
Eric.Grafstein@vch.ca

Dr. Alain Gagnon
Chief Medical Information Officer, PHSA
Alain.Gagnon@phsa.ca

Barb Lawrie
Chief Nursing Officer, VCH/CST
Barb.Lawrie@vch.ca

Elizabeth Stanger
Executive Director
CST Site Implementation, VCH-Coastal
Elizabeth.Stanger@vch.ca

Vicky Crompton
CST Executive Director and
Transformation Lead, PHSA
VCrompton@phsa.ca

Yoel Robens-Paradise
Vice President CST and
Health Information Management, PHC
YParadise@providencehealth.bc.ca