Technology for a Small Integrated Clinic
Provides quality, affordable primary and preventive medical care and health education services in six locations throughout Napa County.

Serves 25,000 patients annually.

Services include: Primary care, Pediatrics, Dental, Ob/GYN, Prenatal care, Integrated Behavioral Health, Community Outreach, Homeless Healthcare, and Pharmacy Assistance.

Community Health Clinic Ole Federally Qualified Health Center
## From Here to There

<table>
<thead>
<tr>
<th>From Here to There</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Original EMR implementation</strong></td>
</tr>
<tr>
<td><strong>Challenges for Cross Agency Information Sharing</strong></td>
</tr>
<tr>
<td><strong>Joint Release of Patient Information</strong></td>
</tr>
<tr>
<td><strong>What Information to Share</strong></td>
</tr>
<tr>
<td><strong>Methods for sharing information</strong></td>
</tr>
<tr>
<td><strong>Where we are headed</strong></td>
</tr>
</tbody>
</table>
Original EHR Implementation

- Executive Champion
- Regional Coalition of Clinics
- Developing a shared vision of Improved Quality, Safety, and Efficiency of Care at the individual and population level
- Commitment to work through difficulties
EHR Implementation Pre Work

- Clinical Committees
- Redesign
- Assess Readiness
- Chart Abstraction
EHR Implementation Training

- **Pre-Go Live**
  - Small group hands on practice, training
  - Super Users

- **Go Live**
  - Individual help while working, reduced load

- **On-going**
  - Group trainings at RCHC combined, individual training, and at work support, reduced load
Lessons Learned in EMR Implementation

- Non face to face work for providers
- Loss of productivity- lost revenue be prepared
- IT support at new levels
- New realms of quality assurance
Increase Access for clients of Health and Human Services Agency

Mental Health and Alcohol and Drug clients are priority clientele

Improved Coordination and Integration of services for high risk patients

County Campus Site Partnering for Quality Care
Our Challenge

- Communicating across agencies and disciplines
- Two EMRs – EClinical Works and Anasazi cannot communicate or effectively store information from other providers
- Keep it HIPAA Compliant
Joint Release of Information

- Organized Health Care Arrangement
- Substance use program
- Making it short
- Explaining it to clients
Ways we Share Information

- Sneaker Net
- Faxed progress notes
- Land line telephone
- Face to face consultation
- Warm hand offs
- Case Conference
### What Information to Share?

<table>
<thead>
<tr>
<th>Need to Know Basis</th>
<th>Psychiatrist</th>
<th>Therapist</th>
<th>Case manager</th>
<th>Care Coordinator</th>
<th>Peer support</th>
<th>Primary Care Provider</th>
<th>Nurse</th>
<th>Medical Assistant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Find out what is needed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Communication Form

<table>
<thead>
<tr>
<th>Contact, Demographics</th>
<th>Conference actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Providers</td>
<td>Health indicators (A1c, LDL, BP, BMI)</td>
</tr>
<tr>
<td>Client goals</td>
<td>Social</td>
</tr>
<tr>
<td>Joint Problem list-diagnoses</td>
<td>housing support systems client strengths useful information</td>
</tr>
<tr>
<td>Medication lists, allergies and adverse reactions, medications reconciled</td>
<td></td>
</tr>
</tbody>
</table>

- Conference actions
  - Health indicators (A1c, LDL, BP, BMI)
  - Social
    - housing support systems client strengths useful information

- Contact, Demographics
  - Providers
  - Client goals
  - Joint Problem list-diagnoses
  - Medication lists, allergies and adverse reactions, medications reconciled
## Referrals and Consents

<table>
<thead>
<tr>
<th>Medication Clinic</th>
<th>CO ID</th>
<th>HHSA ID</th>
<th>Site</th>
<th>RAF Retrnd</th>
<th>Date</th>
<th>Areas</th>
<th>NPP</th>
<th>First Appt</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kermit Frog</td>
<td>1234</td>
<td>5678</td>
<td>MH</td>
<td>yes</td>
<td>5/1/12</td>
<td>4/12/12</td>
<td>all</td>
<td>4/12/12</td>
<td>4/12/12</td>
</tr>
<tr>
<td>Ms Piggy</td>
<td>5678</td>
<td>90234</td>
<td>MH</td>
<td>yes</td>
<td>4/16/12</td>
<td>3/22/12</td>
<td>1,2</td>
<td>3/22/12</td>
<td>3/22/12</td>
</tr>
<tr>
<td>M. Mouse</td>
<td>9012</td>
<td>56789</td>
<td>ADS</td>
<td>yes</td>
<td>8/23/12</td>
<td>7/6/12</td>
<td>1,2,3</td>
<td>7/6/12</td>
<td>7/6/12</td>
</tr>
<tr>
<td>Wiley Coyote</td>
<td>5673</td>
<td>6734</td>
<td>ADS</td>
<td>yes</td>
<td>9/22/12</td>
<td>8/16/12</td>
<td>all</td>
<td>8/16/12</td>
<td>8/16/12</td>
</tr>
<tr>
<td>Snow White</td>
<td>85643</td>
<td>77312</td>
<td>MH</td>
<td>yes</td>
<td>10/23/12</td>
<td>9/17/12</td>
<td>1,2,2</td>
<td>9/17/12</td>
<td>9/17/12</td>
</tr>
</tbody>
</table>

*except testing results*
Experimented with this cloud based technology

Developing communication form/Consent spreadsheet

Case Conference- projection of Communication form

After testing we decide to not pursue-replicating clinical chart, not wanting information outside the EMR.
Next steps

- Paper/fax and land line communication
- Encrypted email - this is basically a secure email from Dr. A to Dr. B or from a lab to a doctor.
- Selected staff from each agency being proficient in both EHRs
- Direct email in to EMR - no other intervention required
Interoperability

- One electronic record system can communicate directly with another
- Direct email in to EMR - no other intervention required
- Use an existing interface ("Mirth Connect" and "ICA" are two possibilities) to bridge the two systems
**Steps for Developing the Interface**

<table>
<thead>
<tr>
<th>What data is to be shared</th>
<th>Match data between sending and receiving sites.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are separate interfaces needed depending on type of information, e.g. labs, x-rays</td>
<td>Interface would read data in one format and re-code the fields to map and match the data in another format. It does this for each side of each transaction (field-by-field matching).</td>
</tr>
<tr>
<td>Map the interface fields</td>
<td></td>
</tr>
</tbody>
</table>
Health Information Exchange

• Regional Health Information Organization (HIO) is in process of forming as Connect Healthcare a non-profit organization

• Includes Hospitals, Clinics, County services, Health Plan, across county lines

• Exploring potential solutions and assessing readiness to join in joint information system
Thank you

Please take a moment to complete your evaluation forms