



**Cook County Health and Hospitals System
Presentation to Inform Strategic Plan
Health Information Systems (HIS)**

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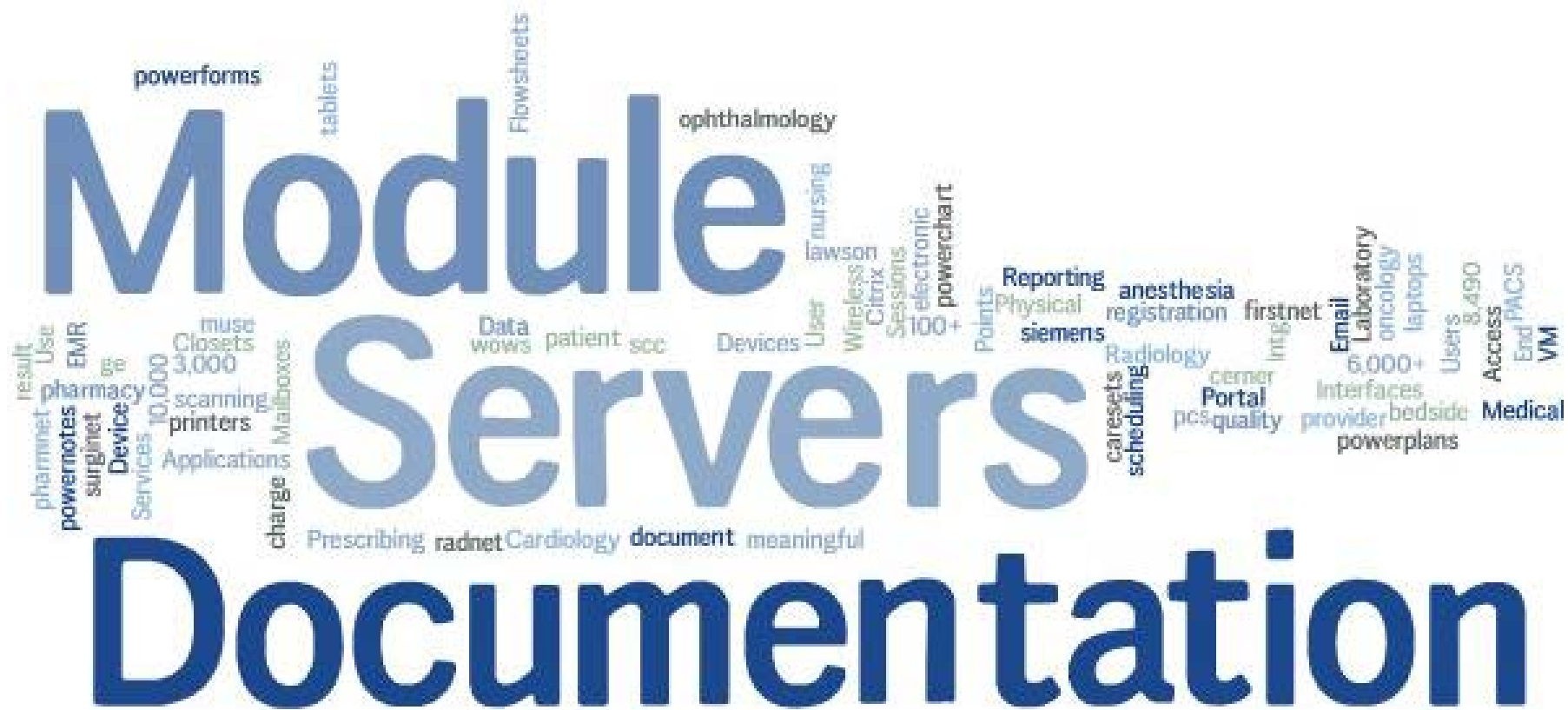
May 20, 2016



**COOK COUNTY HEALTH
& HOSPITALS SYSTEM**

CC+HHS

OVERVIEW



OVERVIEW

HIS supports the following organizations:

- John H. Stroger, Jr. Hospital
- Provident Hospital
- Ambulatory Community Health Network
- Cook County Department of Public Health
- Cermak Health Services serving Cook County Jail
- Juvenile Temporary Detention Center

OVERVIEW

Clinical Applications

Financial Applications

IT PMO

Infrastructure

Telecom

Clinical Engineering

Clinical Informatics

Integration

Server

Desktop

Network

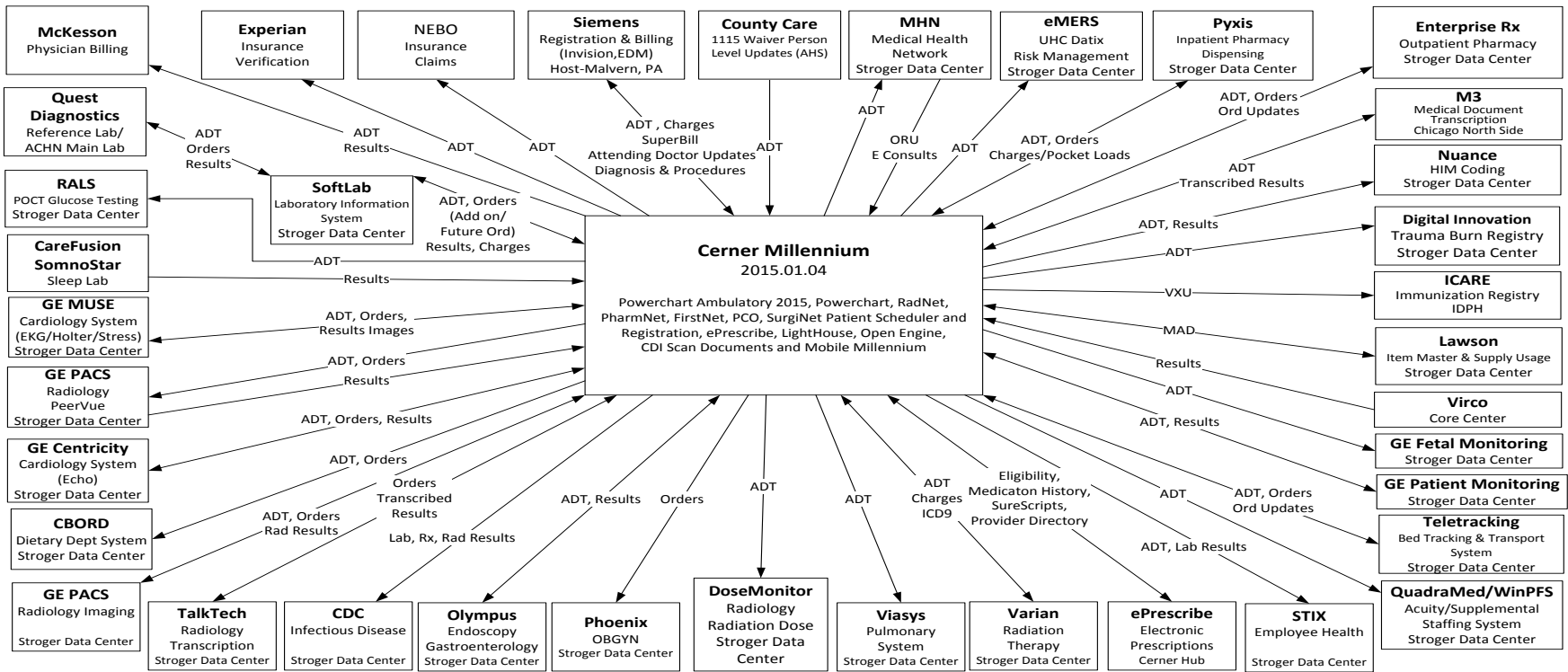
Security

Operations

OVERVIEW

HIS supports integration between these systems:

Cook County Health & Hospitals System - System Flow Diagram
John H. Stroger, Jr. Hospital



OVERVIEW

HIS strengths:

- Integrated Electronic Medical Record (EMR) across all facilities
- Alignment of technology to business
- High performance (human capital)
- Flexibility
- Partnership with EMR vendor (Cerner)
- Ability to work outside of standard application packages:
 - Develop content to meet the unique complex clinical environment (Specialty services, medical home, correctional, care coordination)
- Meeting regulatory requirements (Meaningful Use, Joint Commission)
- Alignment with Quality initiatives

OVERVIEW

HIS has reached HIMSS Level 6:

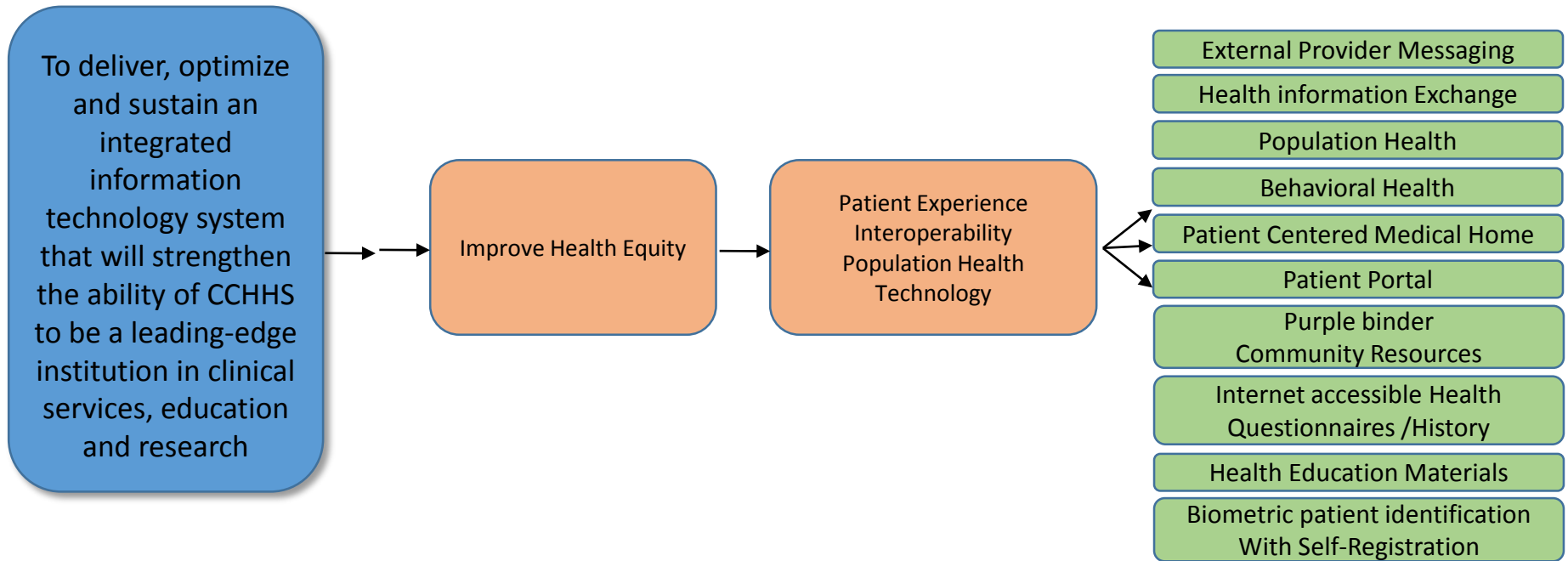


EMR Adoption Model SM	
Stage	Cumulative Capabilities
Stage 7	Complete EMR; CCD transactions to share data; Data warehousing; Data continuity with ED, ambulatory, OP
Stage 6	Physician documentation (structured templates), full CDSS (variance & compliance), Closed Loop Medication Administration
Stage 5	Full complement of Radiology PACS
Stage 4	CPOE, Clinical Decision Support (clinical protocols)
Stage 3	Nursing/clinical documentation (flow sheets), CDSS (error checking), PACS available outside Radiology
Stage 2	CDR, Controlled Medical Vocabulary, CDS, may have Document Imaging; HIE capable
Stage 1	Ancillaries – Lab, Rad, Pharmacy - All Installed
Stage 0	All Three Ancillaries Not Installed

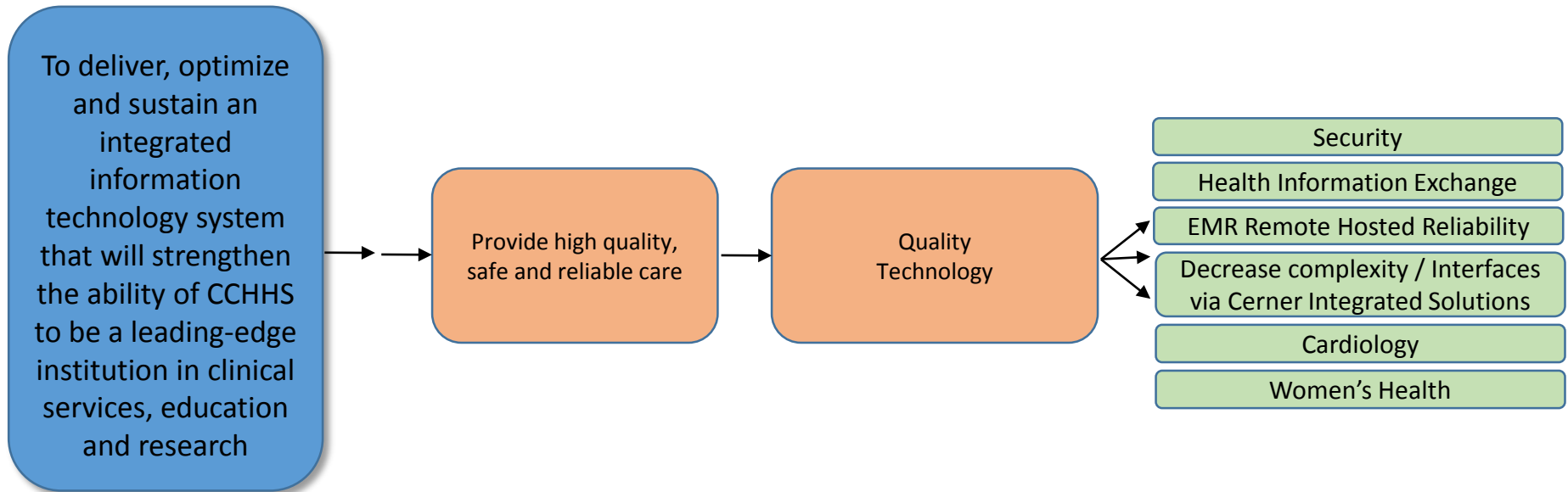
IT STEERING INITIATIVES

- Regulatory
- Financial
- Quality
- Population Health
- Patient Experience
- Provider Experience
- Patient Care Improvements
- Interoperability/Interface
- Technology

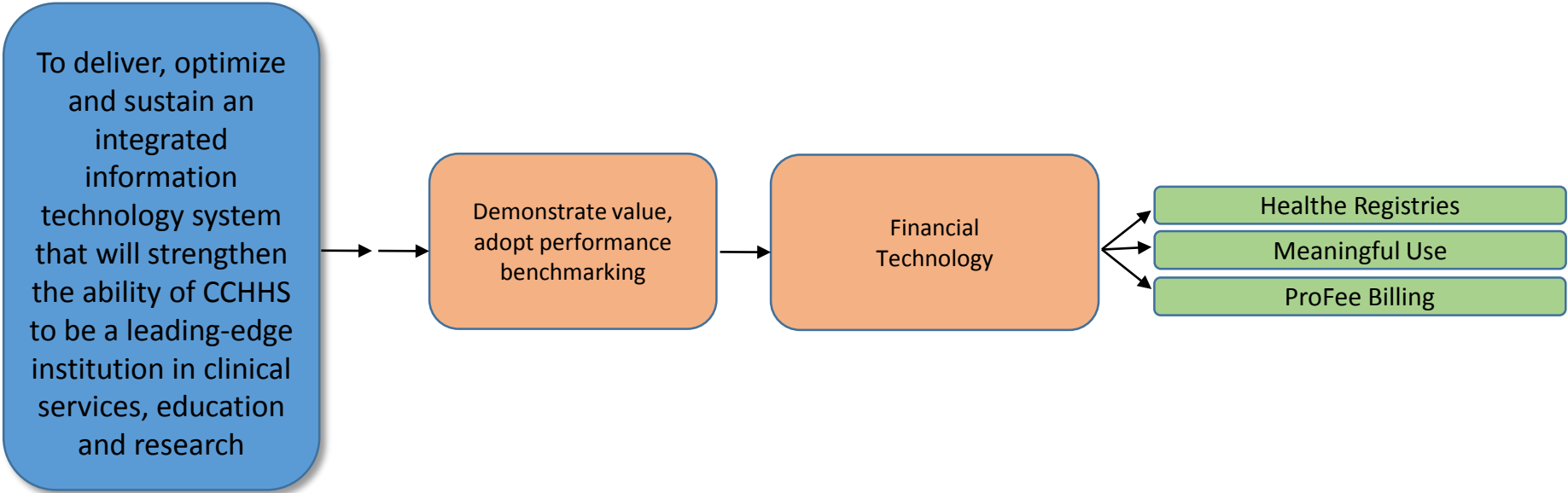
Strategic Planning Framework Guidelines



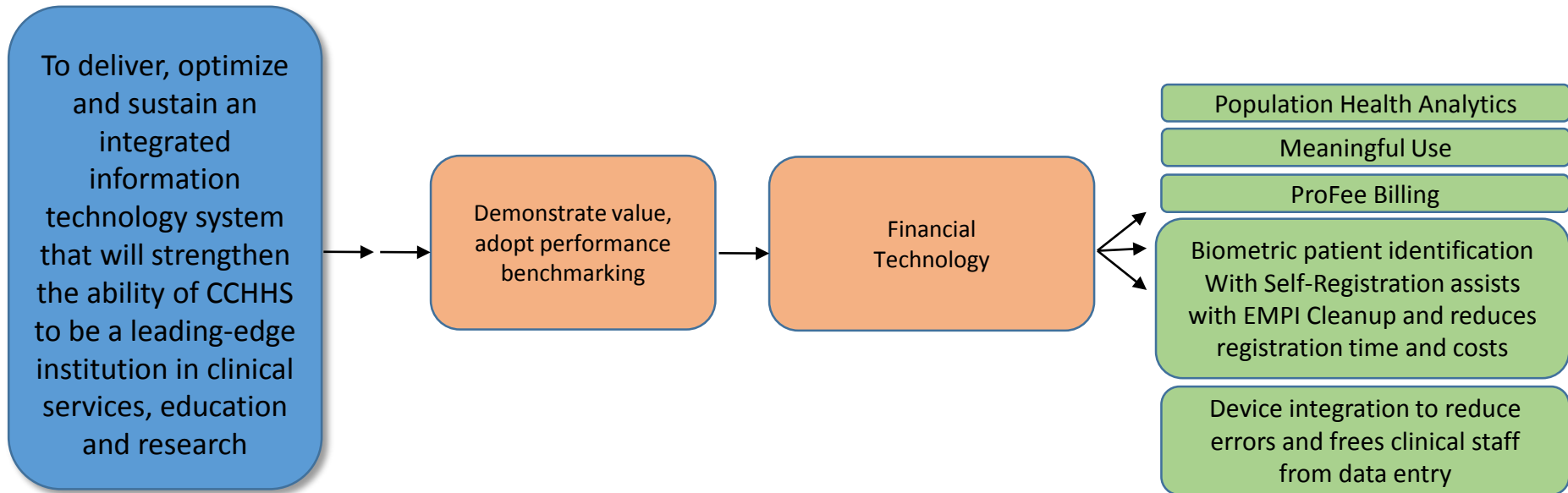
Strategic Planning Framework Guidelines



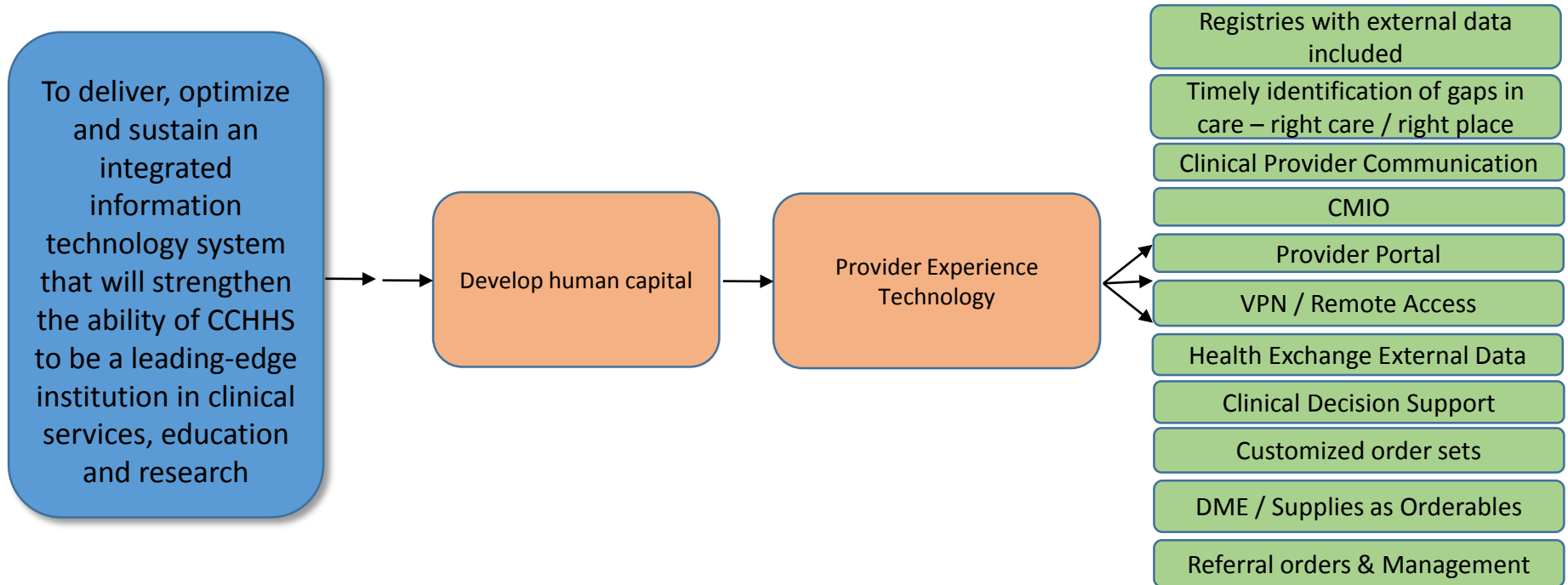
Strategic Planning Framework Guidelines



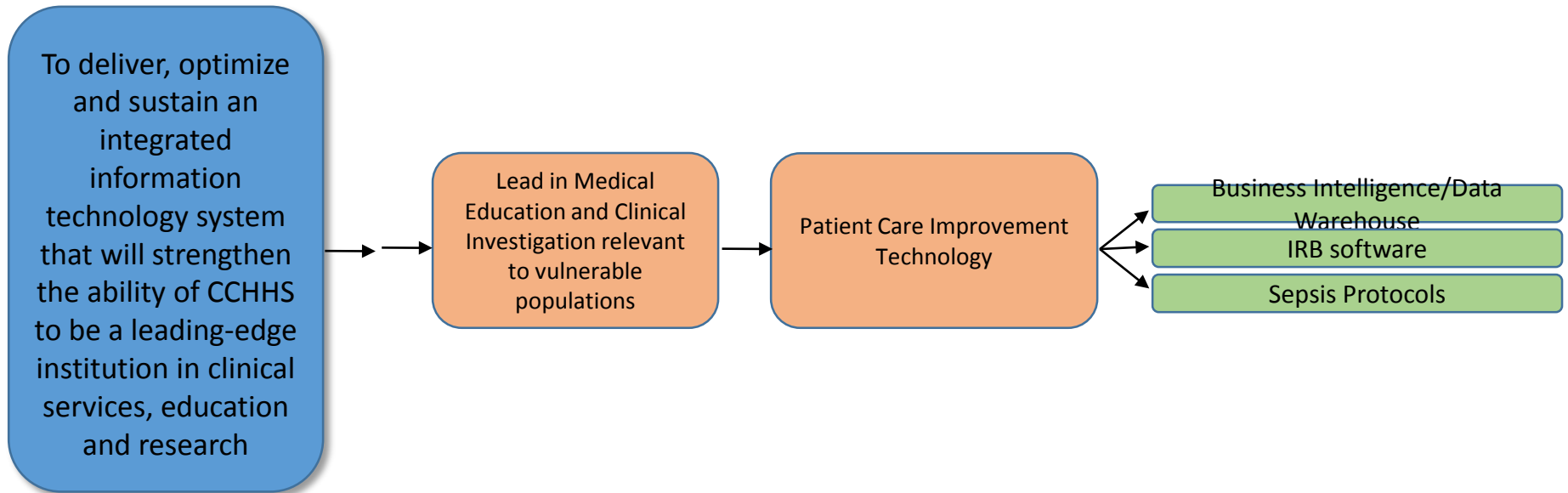
Strategic Planning Framework Guidelines



Strategic Planning Framework Guidelines



Strategic Planning Framework Guidelines



Projects in Motion

- Over 115 active IT projects in process
- Projects include a wide variety of projects: Time and Attendance clock installation, Meaningful Use, Network Upgrades, ActiveDirectory, McAfee Antivirus Standardization, AlertLink, iAccess, Commonwell Data Exchange, Oracle ERP Cook County Project, Lawson Migration, Stroger Data Relocation, JTDC Cerner, LH Rapid Response, HIS Change Control Automation, Clairvia, Workflow Optimization, eSignature, etc.

IT RISKS

- Security
- Limited IT resources (people)
- Inability to keep up with industry standards
- Unplanned Purchases and Projects (non-integrative)
- Government regulations, competition, rapidly changing technology footprint outpacing resources to maintain complex expanding systems
- Training:
 - End-users on new IT applications
 - Continuing education for IT staff
 - Development of internal “bench strength”
- Interoperability of internal and external systems

VISION

“To improve and promote the utilization of health information technology, to its highest capacity, by both patients and health care providers, to optimize health outcomes and overall quality.”

Achieving the Vision

Develop/Implement an IT staffing plan that is reflective of the healthcare IT industry.

- Build a hybrid team consisting of core CCHHS staff, augmented by contracted subject matter experts.
- Allows for flexibility and rapid response of hiring in a competitive environment.
- Continuing support/maintenance of implemented systems.

Achieving the Vision

Continued investment in the latest IT infrastructure technology across the health system.

- Allows for more predictive outcomes with upgrades and greater protection from external security threats.
- Fulfills the need to keep up with the technology in order to maintain the highest level of productivity.
- Move to a leased environment to allow continuous refresh of technology.

Achieving the Vision

Continued investment in EMR optimization to improve efficiency, safety, quality of care and ultimately user satisfaction across the health system.

- Investment in the integration of clinical equipment with EMR to improve efficiency and reduce errors.
- Replace “best-of-breed,” stand-alone systems with Cerner EMR integrated solutions, when possible, to minimize interfaces, complexity and potential points of failure.

Achieving the Vision

Connect patients, providers and community partners with CCHHS.

- Integrate information exchange with community partners via HIE and robust and timely exchange of electronic continuity of care documents.
- Improve patient accessibility and usage of internet portals/ online resources.
- Increase interoperability and cost savings by creating IT partnerships with other hospitals.

Achieving the Vision

Build a stable team of training staff to facilitate efficient application adoption.

Create a panel of informed clinical leaders by considering opportunities for informatics training of CCHHS clinical staff.

PREMIER

Obtaining HIMSS Level 7:

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