

# nsmcNow!

THE NEWS OF THE NORTH SHORE MEDICAL CENTER



With passion and enthusiasm, Ned Kaufman, M.D., NSMC Chief Medical Information Officer, is helping lead the Partners eCare implementation effort on the North Shore.

## AN EPIC TRANSFORMATION

IMPLEMENTATION UNDER WAY FOR INNOVATIVE NEW PARTNERS eCARE ELECTRONIC HEALTH INFORMATION SYSTEM

There is probably no one at NSMC more fully engaged in the Partners eCare implementation than Ned Kaufman, M.D. In his roles as Chief Medical Information Officer and co-chair of the Partners eCare Clinical Council, Dr. Kaufman has been deeply immersed in the Partners eCare initiative from its inception—participating in the early discovery sessions that led to the selection of Epic as the underlying software infrastructure—right up to his involvement in recent go-lives at Massachusetts General Hospital and preparing NSMC for its conversion in January 2017. More than anyone at NSMC, Dr. Kaufman understands how the innovative electronic health information system will transform the delivery of care across the Partners HealthCare system.

continued on page 2

## Virtual Patient Observation

New Technology Introduced to Enhance Patient Safety

In a small observation room located on Macomber 7, monitor technicians Gary Simons and Tara Damico keep a close eye on patients who are at high risk of falling or engaging in other potentially harmful behavior. From this remote vantage point, Simons and Damico—two of a growing pool of monitor techs—can observe up to five patients at once using new continuous virtual monitoring (CVM) technology that is being piloted on the Salem Campus. If a patient shows signs of agitation or sudden movement, Simons and Damico can quickly intervene using an in-room audio system or alarm, while simultaneously summoning a floor nurse for help. The CVM technology is intended to augment NSMC's existing patient observation, or "sitter" program.

continued on page 2



Monitor tech Tara Damico trains Ryan Riley on the new CVM system, while Gary Simons monitors patients at a second observation station.

## VIRTUAL PATIENT OBSERVATION

continued from page 1

“On any given day, NSMC can have a dozen or more one-on-one sitters deployed across both campuses to monitor high-risk patients,” explains Eileen O’Keefe Hammond, R.N., M.S.N., Resource Nursing Supervisor and CVM Program Manager. Stationed at the bedside, these sitters serve an important role in maintaining patient safety, she says, acting as the eyes and ears of the clinical team.

For patients who need a little less oversight, the CVM technology offers a viable alternative to a live, in-person sitter. “To qualify for CVM, patients must meet strict guidelines and be able to follow verbal instructions so they can be easily redirected,” says O’Keefe Hammond. “Generally, the technology is most appropriate for patients who have delirium, dementia or some other form of impaired cognitive function.” The patient or a family member must also agree to using CVM before it can be requested. To ensure HIPAA compliance, each CVM unit features a privacy screen that can be activated during examinations, and no video footage is ever recorded.

“This new technology does not replace any of the current safety measures we have in place; it simply enhances these efforts and is another tool we can use to care for our patients,” says Maura Hines Clouser, Executive Director of Patient Care Services Finance and Business Operations, who was part of the CVM implementation team.

To date, NSMC has purchased five mobile observation units, all of which are maintained and managed by members of the CVM team.



“Our primary focus right now is on educating our nursing staff about CVM and building up a comfort level with the technology,” says O’Keefe Hammond. “There is a learning curve for everyone involved and building trust between the nurses and the monitor techs is key to the program’s long-term success.”

CVM Program Manager Eileen O’Keefe Hammond, R.N., M.S.N., posing with two of NSMC’s newly purchased mobile camera systems.



## AN EPIC TRANSFORMATION

continued from page 1

“Developing and installing an integrated health information system on this scale is an extraordinary undertaking for Partners and I feel fortunate to be part of it,” says Dr. Kaufman. “Not only will the new system enable clinical and administrative information to flow seamlessly throughout the entire Partners network, it will also give us the ability to measure and optimize almost everything we do and continuously improve the care we deliver.”

Mitchell Rein, M.D., Senior Vice President for Medical Affairs and Chief Medical Officer and Partners eCare Executive Sponsor, agrees, adding: “Partners eCare will enhance the ability of all Partners’ hospitals to deliver care that is safer, more efficient and better coordinated. The system will also complement our focus on population health management, quality, safety and value and advance our Culture of Excellence efforts to eliminate serious safety events and provide a perfect patient experience.”

### Replacing a Patchwork of Systems

The current Partners health information system is often described as a patchwork of different administrative, revenue cycle (registration, scheduling, admitting, coding) and clinical systems. This analogy also applies to the collection of information systems and applications currently being used on the North Shore, says Fran Hinckley, Chief Information Officer and Partners eCare Site Executive.

“On the North Shore, we too have multiple locations, physicians using different electronic medical record systems, numerous departmental systems and hundreds of applications—all with varying degrees of connectivity,” explains Hinckley. “It’s a very complex landscape that will be simplified and streamlined when everything is linked together in a common platform.”

### Big Win for NSMC

While he acknowledges the big-picture benefits of Partners eCare, Dr. Kaufman is most excited about its implications for NSMC. “It’s going to be a *really* big deal when we have the ability to fully share information among all of our providers and facilities,” says Dr. Kaufman. “Right now, we have stand-alone systems in the Emergency Department, Birthplace, Surgical Services and other areas that don’t connect sufficiently with the rest of the hospital or our providers outside our facilities. This can lead to frustration for staff, delays, redundancies and potential safety risks.”

MedHost in the Emergency Department is one such stand-alone system. “At present, nurses on inpatient floors can’t see what’s going on in real time with patients in the ED or prepare efficiently enough for new admissions,” he says. When Partners eCare is up and running, MedHost will be replaced by a new Epic application called ASAP, which will enable patient information to flow from the ED to the inpatient floors and throughout the hospital.



## Benefits for NSPG and NSHS

For the staff and providers of North Shore Physicians Group and participating North Shore Health System practices, having a single electronic medical record will also yield benefits. “In the current system, our lack of integration makes it difficult to locate all the clinical information relevant to a patient’s care,” says Lydia Siegel, M.D., M.P.H., NSPG Chief Medical Information Officer. “Partners eCare will give NSPG providers and ancillary staff access to all of a patient’s information in one place, no matter where they are in the system.”

Shared electronic medical records will also give patients easy access to their own healthcare information, she adds, enabling them to be more fully engaged in care decisions. New online tools within Partners Patient Gateway will also make it easy for patients to view and manage appointments, personal information, care instructions and medications.

## Do You Speak Partners eCare?

### Partners eCare

Partners eCare describes far more than the implementation of a new electronic health information system. Partners eCare represents the profound workflow, operational and cultural changes that are taking place across Partners HealthCare as all its hospitals adopt consistent clinical and administrative practices. These practices will enable Partners hospitals and providers to leverage knowledge and build innovative care models around patients that will enhance quality, safety and affordability.

### Epic

Epic is the primary technology vendor for the Partners eCare system. Epic applications will form the backbone of the Partners eCare system, replacing and integrating core clinical and administrative systems that currently exist across the Partners system. Epic is used by many of the nation’s premier medical centers and health systems.

### Organizational Readiness

Organizational readiness is a program designed to operationally implement Partners eCare at each Partners site through a series of change management activities. The corporate Partners eCare organizational readiness team works collaboratively with each site organizational readiness team to ensure the successful adoption of Partners eCare for both clinical and administrative users.

### Workflow Review

Workflow review sessions are a series of demonstrations facilitated by the Partners eCare corporate implementation team that provide staff with an overview of the key clinical and administrative workflows within Epic. Local teams then determine how these new workflows will impact existing operations. Once identified, these impacts are assessed and managed by the site program teams leading up to go-live.

## Positioned for Success

Originally scheduled for October 2015, the Partners eCare North Shore go-live was rescheduled for January 2017 due to adjustments elsewhere in the Partners HealthCare System.

“The ‘pause’ in our time line will definitely work to our advantage,” says Roxanne Worob, NSMC Partners eCare Program Director. “The extra time gave us the opportunity to rethink our organizational structure and continue some necessary work around network cabling and end-user hardware installation.” During the interim period, members of the North Shore implementation team also participated in numerous Partners eCare activities at other institutions, gaining valuable insight that will inform local efforts.



### Drive to Go Live

The official go-live date for NSMC and NSPG is January 28, 2017, with the private practices within North Shore Health System going live in waves beginning on that date and continuing later in the year. “Our implementation effort is well under way and the pace will continue to accelerate as we continue to prepare and begin hands-on training,” says Dr. Rein. “We have a tremendous amount of work to do, but, having participated in go-lives at other hospitals, I can ensure that the end result is worth all the effort. Partners eCare will significantly enhance how we deliver care and improve the patient experience.”

Photos: A meeting with members of the Partners eCare North Shore implementation leadership team, including: Mitchell Rein, M.D., Senior Vice President for Medical Affairs and Chief Medical Officer; Leonor Duncan, NSPG Director of Business Strategy and Partners eCare Program Director; Roxanne Worob, NSMC Partners eCare Program Director; Fran Hinckley, NSMC Chief Information Officer and Partners eCare Site Executive; and Ned Kaufman, M.D., NSMC Chief Medical Information Officer.

## North Shore Physicians Group Welcomes New Physicians



North Shore Physicians Group is pleased to welcome five exceptional primary care physicians who will be joining its team in June. These physicians, who have deep roots in the North Shore community, will soon be affiliated with North Shore Medical Center and Partners HealthCare. Their patients can expect convenient online access and a commitment to exceptional health care.

This group will see patients in its new temporary location in Beverly (100 Cummings Center, Suite 136-P) and will move to a permanent location in Rowley in early 2017.

For more information on these physicians, please visit [northshorephysicians.org](http://northshorephysicians.org).

## Improved Space for Mental Health Patients Opens on Union Campus



An open house and ribbon-cutting ceremony was held on April 22 to celebrate reconfigured space in the Union Campus Emergency Department that will provide a more healing and comfortable environment for mental health patients.

The reconfigured space, which includes five private patient rooms, a seclusion room, state-of-the-art monitoring technology and a bathroom with a large shower, will serve adult and pediatric mental health patients. It is staffed by ED physicians, registered nurses, psychiatry clinicians and a specially trained security officer.

The new space also enables ED staff and psychiatric triage clinicians to work more closely, enhancing communication and disposition planning for this vulnerable patient population.

Top photo: Primary care physicians Kathleen Townes, M.D., Jacqueline Swan, M.D., Eugene Boss, M.D., Julie C. Smail, M.D., and Francis McDermott, M.D.

Bottom photo: Speakers at the April 22 Union Campus Emergency Department ribbon-cutting ceremony.

# NORTH SHORE CANCER WALK



## Sunday, June 26

The 26th annual North Shore Cancer WALK will take place on Sunday, June 26! Starting at Salem Willows Park, and winding through historic downtown Salem, the scenic 10K (6.2 mile) Cancer WALK brings together thousands of participants for an unforgettable celebration of life, courage and community.

Proceeds from the 2016 Cancer WALK will support oncology services at North Shore Medical Center and the Massachusetts General/North Shore Cancer Center.

[northshorecancerwalk.org](http://northshorecancerwalk.org)



2016 Cancer WALK co-chairs Alain Chaoui, M.D., and Daniella Mammola.



**Julie Quinlivan**, *Volunteer, Salem Campus*

As a volunteer “cuddler” in the NSMC Special Care Nursery for the past 15 years, Julie Quinlivan does just what her title implies—she devotes hours of her time each week to holding, rocking and otherwise soothing premature babies when their parents and families are unable to be present. This human contact is vital to the growth and development of premies and also gives Quinlivan a great sense of purpose. “For me, it’s a win-win situation,” she says. “Holding these babies

provides them with a number of medical benefits and brings me a great deal of joy.” Quinlivan is also a longtime volunteer in the NSMC Quality and Patient Safety Department.

“I first got involved with volunteering because I had some health issues that necessitated my using a wheelchair and limited my ability to work,” explains Quinlivan. “Volunteering became a way to occupy my time and still contribute to the world.” And contribute she has, logging more than 5,500 service hours as a volunteer at NSMC since starting in 2003.

A native of Salem, Quinlivan has maintained a lifelong connection to Salem Hospital. As a teenager, she made beds and sold newspapers at the hospital, which led to a lengthy career as a nurse’s aide. Her mother, Judith Quinlivan, was also an advanced licensed practical nurse at Salem Hospital for 45 years. Both mother and daughter have participated as patient representatives in Rapid Process Improvement Workshops held by the Kaizen Promotion Office.

“Being a volunteer, especially my work in the Special Care Nursery, is a very important and meaningful part of my life,” says Quinlivan. “I feel like I’m really part of the team and making a difference.”

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## Physician Retirements

**John V. Gandolfo, M.D., M.B.A.**, a gastroenterologist and former internist in Peabody, retired in April. A former president of the Union Hospital medical staff and a longtime member of the NSMC Board of Trustees, Dr. Gandolfo served as a member of the medical staff for more than 30 years.

**Masahisa Hijikata, M.D.**, a urologist in private practice in Lynn, retired in October after serving on the NSMC medical staff for close to 40 years.

**Eva Statz, M.D.**, a radiologist with Commonwealth Radiology Associates who practiced at Salem and Union hospitals, retired in January after serving on the NSMC medical staff for more than 25 years.

**Alec J. Style, M.D.**, a family medicine physician with Family Doctors, LLC, in Swampscott, retired in April after serving on the medical staff for more than 20 years.

**Christine Tentindo, M.D.**, a pediatric primary care physician who practiced at Kids’ Health in Beverly, retired last summer after serving on the MassGeneral *for* Children at NSMC medical staff for more than a decade.

**Wayne Trebbin, M.D.**, a nephrologist who practiced at Salem Hospital and DaVita-Salem Dialysis, retired in October. The former program director of the NSMC Internal Medicine Residency Program, Dr. Trebbin was a member of the NSMC medical staff for nearly 30 years.

## COFFEE & CONVERSATION UPDATE



Each issue of *NSMC Now* will feature selections from the Coffee & Conversation question-and-answer sessions held regularly with NSMC senior leadership.

**Q: Will NSMC continue to make capital investments in the Union Campus facilities over the next three to four years while construction and renovation take place on the Salem Campus?**

**A:** Maintaining the current high standard of care on the Union Campus while construction takes place in Salem is a top priority. To that end, significant improvements have recently been made to the Union Campus infrastructure to ensure a safer, more comfortable environment for staff and patients. A new electrical transformer was installed this past May and the operating room air handlers are currently being upgraded. Wiring and hardware associated with the Partners eCare implementation have also been installed in recent months and training rooms have been updated.

Additionally, the Union Campus Emergency Department was reconfigured to include a new designated space for mental health patients that opened in April. This reconfigured area provides a more healing environment for patients and includes five private patient rooms, a seclusion room and state-of-the-art monitoring technology.

In the months ahead, plans are under way for further improvement to the Union Campus, including the addition of two additional beds and an outdoor deck in the pediatric psychiatry unit and an upgrade to the Omnicell system in the pharmacy. The possible replacement of the pneumatic tube system is also being evaluated.