

LHIN e-Health Leads Council

May 2008

Newsletter



A quarterly
publication
accessible online at
www.lhins.on.ca

Have a question
about the Council?

Ideas for the
newsletter?

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WELCOME to our second issue of LHIN e-Health Council News. We are delighted to report that we received a very favourable response to our first issue and we look forward to continuing to share our progress and showcasing best practices in the field along the way. The Province of Ontario e-Health strategy direction includes moving toward a secure electronic health record for all Ontarians, predicated upon expanding information systems such as drug, laboratory, and diagnostic imaging. A key component to the e-Health success is real-time access to diagnostic imaging from facility to facility. Great progress is being made across Ontario towards improving patient care. In the spirit of acknowledging and celebrating that progress, we have chosen DI PACS as the focus of our feature article including the collaboration of Southwestern Ontario hospitals and the evolving stories of HDIRS (formerly DI TEN PACS) around a vision of access to any image, at any time, from any place.

It is with this in mind that the e-Health Program has undertaken a tour of the province with the objectives of speaking directly to LHIN e-Health stakeholders, to provide a forum for dialogue and to get input about e-Health innovation at the local level, and within the overall purpose of moving the province towards an electronic health record. To date, there have been ten such meetings with plans for the remaining four to occur before mid-June 2008. The meetings thus far have been in the

North East, North West, South West, Toronto Central, Champlain, Hamilton Niagara, Haldimand Brant, Erie-St. Clair, Central West, Mississauga Halton, and Waterloo, Wellington LHINs. Each meeting begins with an overview of the e-Health Program Strategy. The e-Health Program then turn the meeting over to the LHINs, providing the opportunity for them to showcase their innovations and best practices in e-Health and describe those projects that have worked, those that haven't and those that show the greatest potential for widespread provincial application. The whole point to this exercise is

identifying the innovations that can be leveraged at the provincial level. We need to learn from the people on the ground, from the people who have the relationships with stakeholders, with providers, with the community. In all ten road show visits so far, there is great collaboration and partnership among and between various health care providers in the LHINs, as well as several innovations we hope to see implemented across Ontario in the future. Sincere CONGRATULATIONS to everyone who is involved in bringing us closer to our collective e-Health vision.

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Reaping the Benefits of Shared Services Diagnostic Imaging

Digital Imaging / Picture Archiving and Communication Systems (DI PACS) and Radiology Information Systems (RIS) technologies have been around since the latter part of the 20th century.

Hospitals around the world, including those in Canada, are realizing the benefits of sharing diagnostic images in electronic digital form versus on film and paper. Diagnostic imaging repository services (DI-r) are redefining how diagnostic images and results are shared not just within facilities, but securely and seamlessly between facilities and across geographies - with one overarching goal in mind: improved patient care through better information.

When we look at the multiple benefits from both a clinical and an organizational perspective, it would be easy to say 'what have we been waiting for?' Clearly the answer is complex.

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The Government of Ontario's commitment to system transformation and an electronic record for all Ontarians by 2015 is a driving force for change. Canada Health Info-way leads within the F/P/T arena to bring about change and remains a major funding partner for all jurisdictions. Here in Ontario the Ministry of Health and Long-Term Care e-Health Program is charged with leading this strategic priority and has already invested in key foundational components of an electronic system including drugs, labs and DI/PACS.

Government vision and funding aside, collaboration between broader health sector partners is a major key to success. The commitment among different hospital administrators to work collaboratively toward

a common goal is a significant enabler and results in a win-win for all involved.

Following are two stories of collaboration and partnership among a number of Ontario hospital corporations involving initiatives to accelerate the implementation of reliable and secure electronic health information systems. One involves LHINs in the central and southeastern regions of the province and the other in southwestern Grey Bruce area. As a matter of fact, all 14 LHINs (148 Hospital Corporations) are now involved in regional PACS repositories.

PACS (Picture Archiving and Communication System) leads to a filmless environment by using digital electronics to capture, store and transmit medical images and interpretations. This technology enables healthcare

providers to view patient test images such as x-rays and MRIs and associated reports online.

A Radiology Information System (RIS) is a computerized information system that enables electronic scheduling, storage and organization of diagnostic imaging (DI) patient information as well as overall DI workflow, workload and billing data. RIS reduces the need for paper-based transactions.

Clinical Benefits of DI-r

- Permits faster, easier access to images both at point of care and wherever continuing care is required
- Provides remote access to images for off-hours coverage
- Enables real-time clinical collaboration, increasing access to a broader range of consulting specialists
- Eliminates production of CDs or 'film' for patients being served in the region
- Improves continuity and comprehensiveness of patient care, while reducing patient travel, wait times, and increasing patient throughput

TEN PACS to HDIRS: a magical blend of technology, collaboration and partnership

The HDIRS PACS project - formerly known as the Toronto East Network (TEN) - is a joint initiative by 23 hospital corporations spanning 4 LHINs in central and southeastern regions of Ontario (LHINs 7, 8, 9 and 10) to share diagnostic images and reports across 33 Ontario hospital sites.

Hospital Diagnostic Imaging Repository Services (HDIRS) is a not-for-profit company created and owned by the 23 participating member hospital corporations. HDIRS is committed to developing, implementing and operating a shared medical image and data facility, across multiple sites.

The TEN DI PACS project was launched in early 2005 with a three-year phased implementation strategy for the creation of a shared diagnostic imaging repository service (DI-r) for all member hospitals. In late February 2008, with project membership now at 23, the project reached a critical milestone and a formal partnership was established to implement and support the DI-r infrastructure. The 33 participating hospital sites will have secure and real-time access to relevant patient images including ultrasounds and x-rays from different hospital sites - regardless of the original point of care. In addition, the project will provide disaster recovery, business continuity and network management to improve hospital services and the delivery of patient care.

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Organizational Benefits of DI-r

- Ensures continuity of business operations through redundancy/disaster recovery
- Eliminates need to invest in on-site long-term storage
- Respects local/regional investments without creating a "one size must fit all" scenario
- Improves productivity for radiologists, specialists
- Improves ability to recruit and retain staff

The TEN network of 2005 has come a long way from its inception. Initially they worked with Canada Health Infoway to coordinate RFPs and implementing PACS in partner hospitals that had not yet moved to a filmless digital environment. Incorporating as HDIRS was a major milestone along the way and led to the need to recruit a permanent General Manager and Board of Directors. Pat Ryan, the General Manager of the new HDIRS is very excited about what is being accomplished on the DI-r landscape.

“Today we have the computing power, high-speed wireless and fibre optics, and fortunately the paradigm of hosting systems inside organizations is shifting,” says Pat. “No longer do we need to be independent with separate information systems and solutions. The technology is pushing us to look at large scale and collaborative solutions. We are seeing organizations like HDIRS with shared service organizations within the landscape across Ontario and Canada. These may be perceived by some to be the rare black swan, but I don’t think they are.”

Ryan goes on to add, “While we are proud of reaching this stage, it is important to underline how we got here. This is not just about the technology or the funding. It is about leadership, it is about collaboration and it is about trust. A tremendous amount of foresight went into the design of the HDIRS model. Through collaboration we now have a framework that can accommodate horizontal growth, and sustain the realities of staff turnover, amalgamations or change of governments that could impact us over the next 10 years. Shared services are meant to harness the economy of scale - get us further, faster, to a better and more sustainable place more cost efficiently. Who would not want to be part of that!!!”

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Southwest and Erie St. Clair LHINs enter Next Phase of DI PACS Implementation

In 2002, hospitals in southwestern Ontario began exploring the feasibility of implementing a shared services approach to digital diagnostic imaging. This shared digital imaging project now called Southwest Ontario Digital Imaging Network Project (SWODIN), presented a major opportunity to the 19 hospital corporations in Southwestern Ontario to work together to improve the overall quality of patient care.

"The development and growth of PACS in the South West and Erie St. Clair LHINs has been dramatic over the last five years and our vision of a shared imaging network throughout Southwestern Ontario is becoming a reality," says Diane Beattie, e-Health Lead for South West. "We are very excited about it."

The SWODIN implementation began with Canada Health Infoway's investment in Thames Valley in late 2003 and since then the shared DI-r solution has expanded to partner hospitals in Huron Perth, Grey Bruce and Windsor Essex. The current phase of implementation, jointly funded by the Ministry

of Health and Long-Term Care and Canada Health Infoway, will bring the six PACS systems together through the regional data repository located in London.

"This phase of implementation is particularly challenging because it will link five different Radiology Information Systems (Cerner, Medisolutions, Meditech, McKesson and Quadris) and five different PACS systems (Kodak, Philips, GE, McKesson and Agfa) to the host GE-based PACS system," says Sharon Pfaff, e-Health Lead for Erie St. Clair. "The common standards that Canada Health Infoway ensured were in place at the outset, have allowed these many technology suppliers to be involved. While we do not underestimate the complexity of this phase of implementation, we are confident that the framework is in place for a smooth transition."

The journey to date in Southwest Region has seen significant investment in both human and financial resources. In most parts of the region within the last five years there has been a transition from film to filmless states

– from not being able to share information readily to being able to do so easily and readily. It has changed the way clinicians work and the way care is being delivered. PACS has broken down traditional barriers and opened up new paths of communication. It has fostered collaboration among physicians and partnerships; and shared commitments among hospitals at an unprecedented level across the region.

Perhaps the clinical benefits being realized are first hand. Dan Rooyackers, Seaforth Hospital site Chief (Huron Perth Healthcare Alliance) reports:

"I personally had a fantastic consultation with a neurosurgeon looking over a CT scan of a patient's neck. This was a very difficult case that normally would have involved couriering the films down to London and multiple phone calls and waiting at least a day if not days for the consult. With our PACS system, this took place within 10 minutes . . . a very impressive debut in my mind."

SWODIN

At the same time as this phase of development is taking place, hospitals in the Windsor Essex, Grey Bruce and Thames Valley and Huron Perth areas are already reaping the benefits of having their shared PACS systems up and running:

- the Windsor Essex shared system links three hospital corporations and three sites;
- the Grey Bruce shared PACS system links three hospital corporations and 11 hospital sites (in 11 different communities)
- the Thames Valley, Huron Perth shared system connects 10 corporations/alliances and 15 hospital sites (across 13 different communities).

SWODIN PACS Phase 2.2

