



An OPOR Hub icon has been deployed to desktops across IWK Health and Nova Scotia Health, and we encourage everyone to visit the Sharepoint site regularly! The OPOR Hub is constantly being updated with new information and resources for our future CIS users. <u>Including a new "OPOR Language" resource, which is helpful to become familiar with some of the terms and acronyms used by the program.</u> This will be a great resource when people begin their classroom training.

The OPOR Program held a very successful event with IWK Health at their University Ave. site at the end of May. Our first OPOR Road Show was a full-day event held in the Cineplex O.E. Smith Theatre, and included unit visits to the children's emergency department, women's and children's operating rooms, and the birth unit.

During this event we had stations for staff to learn more about different functionalities of the clinical information system, and to get valuable program information. Having the opportunity to use the Workstations on Wheels (WOWs) was fantastic as many people hadn't used them before. It gave everyone an excellent idea of how the units look, feel, and function.

The IWK Health OPOR Road Show is an example of the various immersion activities the program has planned for our future users. We encourage everyone to attend our virtual town hall events and to read content available on the OPOR Hub, but we understand the value in being on-site with devices and to answer questions. We look forward to another event at IWK Health in August and have begun planning Nova Scotia Health events as well. Stay tuned!

The WOWs used during the Road Show are an example of the non-clinical devices (NCDs) that will be deployed across the system for the OPOR-CIS. Program leadership, along with the CIS vendor Oracle Health, and executive leaders from IWK Health, Nova Scotia Health, the Department of Health and Wellness, and the Department of Cyber Security and Digital Solutions worked together to develop the OPOR NCD Standard.







# Leadership update continued

This document, which is available on the OPOR Hub, outlines the specifications for non-clinical devices that will be provided by OPOR. It has been endorsed by leadership and there are to be no further amendments at this time. Units, departments, and sites with NCD needs outside of what is required for OPOR will have to follow their regular processes. This standard document, and the devices deployed by OPOR, are specifically to support the implementation of the CIS.

Over the coming weeks, members of the OPOR Program Team will be visiting sites again, and meeting with mangers and leads to discuss the deployment of non-clinical devices and the space requirements. These visits and meetings are very important to ensure we have the most accurate data and information about the units. These are not opportunities to make changes to the NCD Standard, or place orders for other devices.

We appreciate the support from IWK Health and Nova Scotia Health sites and units as our teams validated existing devices and facility details to help us plan for this massive transformation.

# **OPOR ENGAGEMENTS**

# **OPOR Passports**

OPOR has developed User Passports as an interactive resource to outline key activities and actions users can take to help prepare themselves for the new CIS.

The passports include mandatory activities, such as completing classroom training, and others are optional to enhance overall readiness. Four passports have been developed for different groups: end users, provider, manager, and senior leaders. We all have a part to play!

<u>Please visit the OPOR Hub for more information and to access the passports.</u> Users can download the appropriate passport PDF, save to their desktop, and use the "draw" tool to mark when actions or activities are complete. The files can also be printed for manual marking.

# **Provincial Virtual Town Halls**

OPOR Provincial Virtual Town Halls are an excellent opportunity for all physicians, clinicians and healthcare workers across IWK Health and Nova Scotia Health to learn about the program and new clinical information system.

Meetings typically feature a program overview and a CIS demonstration, along with a Q&A period. These are held the third Tuesday of every month from 3-4pm, the next on Tuesday, July 15. <u>For more information on these events and to register, please visit the OPOR Hub.</u>

### **OPOR Hub**

If you are looking for more information on OPOR, check out the <u>OPOR Hub!</u> The OPOR Hub is your one-stop-shop for the latest information and resources. Additional information, links and resources will be added over time - so make sure to bookmark this site for easy access. In early June, an OPOR Hub desktop icon will be deployed across IWK Health and Nova Scotia Health for easy access!

## PROGRAM UPDATE: AT-THE-ELBOW

The OPOR-CIS implementation will impact nearly every area of patient care across Nova Scotia at both IWK Health and Nova Scotia Health. To support this implementation, the OPOR Program has established an Atthe-Elbow (ATE) team. This support model is designed to provide rapid, personalized assistance to providers, clinicians, and staff when the OPOR-CIS is first implemented at a site.



ATE Support Consultants scheduled directly at a department for a set timeframe, matching the department's hours.



ATE Support Consultants not assigned to a specific department or area but can respond to requests for additional support from areas that do not have static support.



# Virtual

Support for departments or areas that do not require ATE onsite due to location, functionality with the CIS, or staffing numbers.

The OPOR Program is currently preparing ATE support staff through extensive CIS training and workflow orientation, on-site engagement sessions to better understand department operations, and preparation for staffing plans.

### ATE Support will:



Reduce disruptions by minimizing workflow interruptions and addressing issues promptly.



Enhance patient care, allowing users to focus on patients rather than any technical challenges they may experience.



Build confidence by helping providers, clinicians, and staff become proficient and comfortable with the CIS functions.



Accelerate adoption by speeding up the learning curve, leading to quicker realization of CIS benefits.

Currently there are members of the ATE Team who are working with sites, units and departments to plan for their support model. This includes building relationships to ensure site and unit-based providers, clinicians and staff know who to speak with, gaining insight into the nuances of different units and teams, and validating data such as operational staffing levels and hours of operation. All this information helps OPOR and the ATE Team plan on how to best support the future users.



# **OPOR SPOTLIGHT: DRESS REHEARSALS**

Dress rehearsal, also known as mock go-live, is an event that will help us through that final stage of preparations with a simulation of the actual OPOR-CIS implementation launch in a controlled setting. It will provide valuable insights as the program nears the activation phase.

This event will take place approximately six-weeks before IWK Health begins using the CIS when delivering patient care. During the dress rehearsal we will:



Operations in the clinical areas involved in a dress rehearsal function as normal during the event. A key activity that occurs is "mirror charting" which involves clinicians performing dual documentation where they continue to chart in the current system while also documenting the same activity in the new OPOR-CIS. Charting would occur in the current system first, with mirror charting immediately after.

It is important to note, the data entered in the OPOR-CIS during this event will be cleared and will not become part of the official patient record. In the event of a patient emergency or code, the mirror charting activities will be paused.

While much of this testing of integrations, workflows and scenarios has happened during testing phases, the dress rehearsal brings that testing closer to the reality of delivering patient care in a controlled setting. It ups the realness of the testing process, giving the program even more insight into how go-live will look.

The program is working with IWK Health leadership now to finalize units for dress rehearsal activities. This series of events is currently planned for IWK Health only as we get ready for our first implementation wave of the OPOR-CIS.

## PRACTICE INTEGRATION: PATIENT IDENTIFICATION

The implementation of a new provincial CIS will bring many benefits to patients and healthcare teams. This includes digital patient identification functionality which will improve registration and information management.

#### Components of digital patient identification:



**Medical Record Number (MRN):** A unique identifier assigned to each patient in a healthcare system. It plays a crucial role in organizing, tracking, and managing patient information throughout their care journey. This is not the same as a health card number.



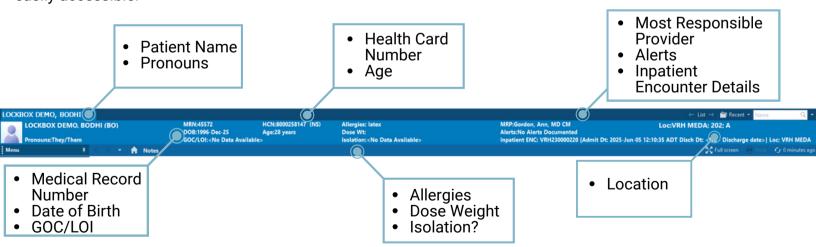
**Encounter Number:** A unique identifier assigned to a specific visit or episode of care that a patient has with a healthcare provider or facility. Tracks the details of a single interaction, such as a hospital admission, outpatient appointment, emergency room visit, or procedure.



**Banner Bar data:** Pronouns, name used, allergies, and other alerts can be recorded in the OPOR-CIS. The banner bar will display some of these values in PowerChart and other applications.

#### **About the Banner Bar:**

The Banner Bar will be visible at the top of the patient record in the OPOR-CIS. Information such as MRN, date of birth, allergies, weight, and other key pieces of information clinicians need quickly to provide care. This information, along with goals of care (if applicable), levels of intervention, and health card number, will all be easily accessible.



This functionality will ensure care teams have visibility of critical patient identifiers, which ultimately improves patient care and efficiency. This is an example of how the CIS will support patients in not having to repeat details and information repeatedly to each provider or clinician who sees them. Having the shared information also improves continuity of care between providers, clinics and sites.

# **OPOR-CIS JOURNEY: PATIENT IDENTIFICATION**

Liam, an active 13-year-old with a love for video games and complicated Lego sets, had been experiencing sharp pains in his abdomen. One afternoon while he was home in Lunenburg, the pain intensified. His father took him to Fisherman's Memorial Hospital's emergency department to be assessed.

Liam's father presented his Nova Scotia health card at registration. Liam was given a scannable armband which would later be used to confirm his identity, bringing up his medical record number (MRN) which linked all his health history in the OPOR-CIS. When registered, a new encounter was created that would capture the

data from this specific visit.

After a short wait, Liam was seen. The attending physician, Dr. Martin, logged into the OPOR-CIS and in the Banner Bar, could see his weight, age, date of birth, and that his pronouns were he/him. Blood tests and an ultrasound were ordered, and the nursing staff setup an IV for pain medication. Dr. Martin quickly and efficiently placed the orders through the OPOR-CIS with computerized provider order entry, and the request and information was immediately sent to diagnostic imagining and the lab.

After assessing the labs and ultrasound, it was determined that Liam would need to have his appendix removed. Dr. Martin planned to have Liam transferred to IWK Health in Halifax for the surgery.

Liam and his father travelled to IWK Health via ambulance. Liam was greeted warmly by the registration clerk who scanned his armband. The scan instantly pulled up his MRN, linking all Liam's health history across the hospital system, from lab results to past appointments. It did not matter that he had been treated at a Nova Scotia Health facility and then an IWK Health facility – it was one person and one record.



Once admitted at IWK Health, a new encounter number was generated to track all procedures, results, and documentation related to this specific surgical admission.



As part of the surgical safety checklist, the nurse used the Banner Bar in the OPOR-CIS to confirm Liam's identity. She scanned his wristband again, and the CIS immediately displayed Liam's profile, MRN, and encounter details.

In the operating room, the anesthesiologist used the OPOR-CIS to review Liam's record, including his allergy list. Meanwhile, the surgeon used the same system to access pre-op imaging and lab results, ensuring all data was current.

After a successful 45-minute procedure, Liam was wheeled into recovery. The attending nurse documented pain assessments, medications administered, and post-operative instructions directly into the OPOR-CIS. This information would be valuable for Liam's primary care provider.

The next day, Liam was discharged with aftercare instructions, and a notification was sent to his primary care provider to ensure seamless follow-up. His encounter record was closed, but his MRN remained active—ready for whenever he needed care again, anywhere in the province.