Development of an Integrated EMR Across Multiple Hospitals to Meet The Joint Commission’s Standards for Inpatient Palliative Care (FR460)

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Objectives
- Define the need for an effective EMR to improve patient care and meet industry standards.
- Describe the elements needed for The Joint Commission’s accreditation for palliative care.
- Identify measureable operational, clinical, and financial outcomes.

The Joint Commission (TJC) established advanced certification for palliative care programs. The electronic medical record (EMR) provides an opportunity to meet these standards. There are multiple delivery systems that hospital programs use to deliver palliative care. CHE Trinity is the second largest Catholic healthcare system in the country, serving 21 states nationwide, and is standardized using the Cerner EMR system of Powerchart. Palliative care was identified as a system-wide strategic initiative for FY 13-FY 16. The FY 13 focus was in the acute care setting, and two of three key deliverables were to standardize and centralize documentation and data reporting. It was determined to incorporate both TJC certification standards and NQF palliative care endorsed measurement standards in an effective and user friendly format that meets the need of the palliative care core team. Two workgroups were initiated, documentation and metric, that would support the subsequent delivery system of each hospital (MD led, APN led, RN led). In addition to the initial consult and progress note development, separate standardized documentation was developed for psychosocial assessment, chaplaincy assessment, and interdisciplinary team note that met National Consensus Project palliative care quality practice guidelines. In March 2014 the process went live and is now being used in 28 different hospital systems across CHE Trinity. We will report lean strategic approaches; project details; successes; challenges; lessons learned; and measureable clinical, operational, and financial outcomes.