

Welcome to What's New in e-Health.

This electronic newsletter is designed to inform, educate and update you on the provincial e-Health Program, e-Health initiatives and selected activities in Ontario and beyond. It is intended as a quick reference and should take you only a few minutes to read.

What's New

Renewed provincial e-Health Strategy being refined

The 2007 Budget shows the government's commitment to system efficiency and system integration to meet patients' needs with the provision of an additional \$64 million in 2007/08 towards the development of a renewed provincial e-Health strategy. Key features of the strategy include moving towards a secure electronic health record for all Ontarians, and expanding systems providing drug and laboratory information, as well as diagnostic imaging.

Renewal in the e-Health Program

As reported in the previous issue of What's New in e-Health, Ron Sapsford, Ontario's Deputy Minister of Health and Long-Term Care, appointed Assistant Deputy Minister Gail Paech as the new e-Health Program Lead. Gail's mandate is to align and integrate provincial e-Health initiatives within the e-Health Program. In addition to continuing in her role as ADM, Service Renewal and Alignment Project and ADM, LHIN Coordination Project, as the new ADM of e-Health Program, she will direct oversight responsibility for the e-Health Program in its cross-functional capacity for all e-Health initiatives across the ministry and with key stakeholders, including

Smart Systems for Health Agency. Steini Brown continues to have responsibility for the development of the provincial e-Health Strategy.

To help drive Ontario's e-Health agenda forward and truly establish e-Health as the central program area for e-Health within the ministry, a new organizational structure has been established. Under Gail's leadership, the following team takes on responsibilities within the new structure:



Gail Paech

Assistant Deputy Minister
e-Health Program Lead

ADM, Service Renewal and
Alignment Project

ADM, LHIN Coordination Project



Vytas Mickevicius – Executive

Lead. Vytas' responsibilities include overseeing the operations of the e-Health Program, and ensuring that strategic directions are implemented. Contact Vytas at vytas.mickevicius@ontario.ca



Steve Bowley – Project Management Office. Steve’s team brings centralized project management discipline to the implementation of the e-Health Program’s activities and functions as an enterprise Project Management Office (PMO), in support of e-Health initiatives. He can be reached at steven.bowley@ontario.ca



Jim Cassimatis – Corporate Management. In addition to responding to the requests and requirements of the government, Jim’s unit has responsibility for communications, human resources, procurement and financial reporting. Jim can be reached at jim.cassimatis@ontario.ca



Dennis Ferenc – Client Relations. Dennis’ team’s role include liaison with Canada Health Infoway, the Smart Systems for Health Agency, LHINs, and other key e-Health stakeholders within Ontario and other jurisdictions. Dennis can be reached at dennis.ferenc@ontario.ca



Anne Finlay – Program Portfolio Management. Anne’s team is responsible for the migration, consolidation or creation of e-Health initiatives under the e-Health Program umbrella. Anne can be reached at anne.finlay@ontario.ca



Mike Monteith – Architecture, Privacy and Security. Mike and his unit are responsible for developing the overall strategic context for the e-Health enterprise architecture, as well as privacy and security policies for e-Health in Ontario. Mike can be contacted at mike.monteith@ontario.ca



Doug Tessier – Integration and Alignment. Doug’s team is responsible for identifying and resolving policy, program and tactical issues both within and across e-Health initiatives, and for ensuring e-Health alignment on critical elements including LHINs, physician e-Health, client registry and EMPI (Enterprise Master Person Index). Doug can be reached at doug.tessier@ontario.ca

e-Health in Focus

Brief review of e-Health Program mandate and objectives

Since the last e-Health newsletter, issued in August 2006, momentum continues to build as Ontario’s Ministry of Health and Long-Term Care moves toward its vision: transformation of the health care system through a master network of integrated electronic health records linking a multitude of point-of-service systems throughout the province and beyond.

While e-Health stakeholders know and understand the mandate and objectives of Ontario’s e-Health Program, it is appropriate, as we rapidly approach the official launch, to review them in context:

The e-Health Program mandate:

- To establish and maintain the strategic e-Health foundation of Ontario’s broader health sector

e-Health Program authority, roles and responsibilities include:

- Responsibility for oversight and approval of all e-Health initiatives across the ministry and the broader health sector that are implemented provincially
- The e-Health Program is the central contact point on e-Health portfolio management for the Ministry of Health and Long-Term Care and key stakeholders, ensuring alignment with the e-Health strategy and its benefits

The e-Health Program will specifically ensure that:

- Accountability mechanisms are established for all e-Health initiatives
- Projects comply with provincial e-Health policies, standards and architecture
- Performance measures are implemented to assess achievement of results
- Issues and risks are managed, and interdependencies across projects are understood and managed
- The ministry maximizes collaboration and funding opportunities such as Canada Health Infoway

We're not alone

Global experience proves that the transformation of health care systems on such a massive scale cannot happen without a comprehensive, coherent and sustained e-Health strategy. At its most basic operational level, it means shifting an entire health care system from paper-based to computer-based records and information sharing. Given the nature of health care in comparison to other business sectors, this does not come without its challenges to different sectors of health or individual providers. However, the shift is essential for improved quality and efficiency of care and patient safety.

Many health jurisdictions around the world have implemented system transformation through the innovative use of information technology, and the outcomes and benefits speak for themselves. Initiatives are presently in play and expanding in the United Kingdom, European countries, New Zealand and the United States.

e-Health in Action

All of the “stories” that follow in this e-Health in Action section serve as tangible proof of the importance of connectivity within and between our systems. A prime example is the Tri-LHIN experience, which reveals the direct positive impact of a patient-to-provider link, and demonstrates more broadly what electronic sharing of information in a clinical setting can accomplish in the direct delivery of patient care. The creation of LHINs is seen as being the pivotal step to transforming the system as a whole.

The Tri-LHINs experience – Grand River Hospital Chronic Kidney Disease Management

In December 2006, a new portal was launched enabling up to 1,500 chronic kidney patients to self-manage their disease by direct interaction with their health care teams. For pre-dialysis patients, self-management, together with the early intervention of health care specialists, can delay progression of the disease, result in improved quality of life and save the health care system thousands in treatment costs. Named *The Chronic Kidney Disease Patient Portal*, this vital new online tool was developed with a \$2 million investment from Canada Health Infoway, and through the combined efforts of Grand River Hospital in Kitchener, Hamilton Health Sciences Centre and the University Health Network in Toronto, working with their respective LHINs: Waterloo Wellington, Hamilton Niagara Haldimand Brant and Toronto Central.

“The Tri-LHIN Patient Portal project will support our Integrated Health Services Plan by allowing provider organizations in these three LHINs to become more focused on the needs of patients/clients and their families,” said Bruce Lauckner, e-Health Lead for the Waterloo Wellington LHIN. *“The investment being made by Infoway will advance the services provided to residents of our LHINs suffering from chronic renal disease.”**

The Tri-LHINs experience is a prime example of successful outcomes resulting from collaboration between LHINs. *“This project is a wonderful example of how leveraging existing success and initiatives can benefit many others,”* says Dennis Ferenc, Lead on Client Relations at e-Health Program.

** For the full story on this ground-breaking Tri-LHINs initiative, visit www.infoway-inforoute.ca*

Innovative technology for the Sherbourne Health Centre

Sherbourne Health Centre provides innovative primary health care, counseling, support, outreach, health promotion, and education programs to their clients – the many individuals who reflect the diverse and vibrant communities of southeast Toronto.

In November 2006, Minister of Health and Long-Term Care George Smitherman announced an investment of more than \$2.5 million for expansion of access to the Centre’s services. And in February of this year, Canada Health Infoway announced a \$900,000 investment to develop an electronic interface linking three care settings: the Health Clinic, two mobile health buses and a 20-bed infirmary for under-housed people released from acute care.

“Since it began, Sherbourne has been dedicated to innovative approaches to primary health care. With the ministry’s ongoing generous help and now with Canada Health Infoway’s support, we’re able to move forward with plans to creatively use new EHR technologies,” says Denny Young, Director of Communications and Fundraising.



One of the three buses that will enable nurses to electronically access up-to-date health information on their patients.

This self-contained, interconnected e-Health “ecosystem” is a prime example of electronic connectivity, as nurses and caseworkers on the buses will now be able to access Sherbourne’s existing electronic health record system to access, create and update patient records. When the project is complete, caregivers will have seamless connectivity between all three health care settings.

Minister Smitherman commended Infoway’s added support to the ministry’s own efforts. *“The Sherbourne Health Centre provides unique services to a diverse community in the heart of Canada’s largest city,”* he said. *“Our government continues to recognize and support the important work of the Centre, most recently through an investment to increase access to services.”*

Electronic triage for Scarborough General’s ER

A joint press release from the Scarborough General Hospital, Canada Health Infoway and MOHLTC in early March 2007 announced the development and installation of electronic self-entry kiosks in the SGH emergency department. Increasing patient volumes at the hospital are threatening the efficiency and viability of its ER. A significant percentage of this demand comes from patients who either do not require emergency care, or whose need is difficult to assess.

As a result, access for those with real need is delayed, and ER staff are faced with intense pressure. In an effort to speed up triage, reduce ER delays and deliver faster care to those whose need is urgent, **Canada Health Infoway is investing more than \$1.5 million in self-entry kiosks which allow incoming patients to use touch-screen technology, in one of seven languages, to enter in-depth data which is directly linked to the triage staff and physicians.**

“The investment in this new e-Health tool provides improved access to care,” said George Smitherman, Ontario’s Minister of Health and Long-Term Care. *“It serves as another example of the vital role ‘smart tools technology’ has in transforming our health care system.”*

EHR up and running at eCHN

An electronic health record (EHR) is the fundamental building block in evolving Ontario’s health care system into the high-performance, accessible, interconnected and sustainable system needed for the future. While there are very few examples, nationally or internationally, of a fully operational EHR for a large population base, we actually have one in our midst today – up and running, and running well: the *Electronic Child Health Network (eCHN)* based at The Hospital for Sick Children in Toronto. Launched in 1997 by the then-Ministry of Health, eCHN is Canada’s only pan-provincial functioning EHR system.

eCHN is also one of Canada’s largest electronic records repositories, linking more than 500,000 children from more than 2.4 million visits at 98 hospital sites across Ontario. Citing the success of eCHN, CEO Andrew Szende said, *“eCHN has enabled clinicians to follow their patients’ clinical data in real time as patients travel from one institution to another.”* Referring to the vital role of connectivity, he went on to say, *“Any information system anywhere in Ontario that is collecting clinical data about patients can*

be part of eCHN’s integrated chart. This is, in fact, eCHN’s unique achievement: It is the first functioning integrated health record in Canada.”

As part of the ministry’s e-Health Strategy, eCHN is currently being considered as the foundation for the development of an adult EHR application. For more news about eCHN, visit **www.echn.ca**



Medisolve ER kiosk – Patients visiting Scarborough General Hospital Emergency Department will now be able to key in their own personal health information in one of nine different languages, including English, through the emergency room kiosks.

Ontario Telemedicine Network

In November 2006, the OTN officially announced its creation as a result of a merger of three existing entities: VideoCare, CareConnect, and NorthNetwork. The Network's goal is the seamless integration of telemedicine into everyday health care delivery.

OTN came to fruition as a result of collaboration between three original tele-medicine networks, e-Health Program, MOHLTC and Canada Health Infoway.

As this newsletter goes to press, OTN offers telemedicine solutions to every hospital in the province, and is currently expanding its services to encompass clinics, public health, long-term care and mental health facilities, and community care.



"The commitment and innovation of OTN's partner organizations and the health care professionals of Ontario have made the province a leader in the field of telemedicine," said Dr. Ed Brown, Chief Executive Officer of OTN. *"Today, by operating as one network, OTN has increased its capacity to enhance access to care for people across the province*

by reducing the barriers of time and distance. Telemedicine makes accessing health care services possible anytime and anywhere, while reducing

the time, cost and hardship of travel for patients and their families. For many people in the province, it has already changed their lives."

The positive impact of telemedicine technology cannot be understated, as the ability to "tele-treat" overcomes a wide range of physical, socio-economic, geographic and logistical challenges.

The benefits include:

- Improved access to doctors, nurses and other health care professionals
- Timely access to emergency services, regardless of time and distance, and
- Reduced time, cost and risk of travel for patients, families and health care providers, thereby minimizing disruption in their daily lives

On the occasion of the November 23 launch, Health and Long-Term Care Minister George Smitherman said, *"The Ontario Telemedicine Network provides access to important health care services and is a valuable resource for people in under-served areas."* He went on to point out, *"By connecting health care professionals to patients who live in isolated communities, OTN is building on our government's plan to strengthen our health care system through innovation."*

New CEO at the helm of SSHA

On February 19, Smart Systems for Health Agency (SSHA) announced the appointment of William Albino as its new CEO.

Albino brings more than twenty years experience in the information technology and telecom industries, and has served as a board member, senior executive and general manager for companies in Canada and the U.S. He served as Executive Vice President and Senior Vice President, Sales at EDS Canada as well as senior management at Xerox both in Canada and the United States, and has run his own consulting company for technology start up companies.

On his new role of CEO of SSHA, Bill Albino says *“I know from my previous roles that many opportunities exist to improve the flow of patient information in health care with information technology. SSHA has a unique role to play by making that information available between organizations and professionals across Ontario. I look forward to contributing to this difficult but exciting goal.”*

For more information on Smart Systems for Health Agency visit www.ssha.on.ca

Ontario’s e-Health projects and initiatives continue to win awards

In September 2006, the Showcase Ontario event, billed as “Canada’s largest Information and IT education conference and exhibition”, was held at the Metro Toronto Convention Centre. This highly successful annual convention attracted its largest turnout ever.

In addition to the featured exhibits profiling partnerships between business and I&IT, and the seminars and keynote presentations providing valuable updates and learning on IT initiatives, the conference buzzed with anticipation for the event’s annual Showcase Awards.

This year’s Showcase Ontario yielded an impressive array of awards for e-Health and IT-related initiatives in Ontario. While space in this newsletter allows only a brief mention of each, to view the full story go to www.health.gov.on.ca/health/awards.pdf. Here are the highlights of this year’s e-Health-related awards:

- The integrated Public Health Information System (iPHIS) project team: A Diamond Award in the Organizational Transformation Category. The Diamond is the top award in this category.
- The team from the Eight Hospitals – One EPR: A Partnership that Works project: A Diamond Award in the Working Together category, again, the top award in this category for the Thames Valley Hospital Partnership Project.
- The Drug Profile Viewer System: A Merit Award in the Innovation category for developing Access to Ontario Drug Benefit history within Emergency Departments.

Congratulations to all!

What's in an acronym?

The next time you read through one of our documents, press releases, reports or white papers, just for fun, count the acronyms that pop up on almost every line. For example, here's a line from a document on the Enterprise Master Person Index. "*The EMPI will be developed and implemented by CCO in conjunction with SSHA on behalf of the MOHLTC as the agent of the MOHLTC under PHIPA.*" To quote an old ad campaign slogan, "We're not making this up." To an outsider, this staggering array of letters and groupings might make the eyes glaze over. But we on the inside are, of course, quite comfortable with all of these acronyms, and bandy them about happily. They've become second nature for us. Or have they?

In the spirit of light-hearted but well-meaning clarification, this issue of *What's New in e-Health* offers the first in a series of acronym meanings; a "Glossary of Terms" that even the most experienced e-Health Program professional might sometimes find useful.

Glossary of Terms

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| ASP | Application Service Provider |
| CHI | Canada Health Infoway |
| CMS | Clinical Management System |
| CRM | Client Relationship Management |
| DI | Diagnostic Imaging |
| DPV | Drug Profile Viewer |
| eCHN | Electronic Child Health Network |
| EDA | Emergency Department Access |
| EHR | Electronic Health Record |
| EMPI | Enterprise Master Person Index (client registry) |
| EMR | Electronic Medical Record (provider based) |
| EPR | Electronic Patient Record (hospital based) |
| HIAL | Health Information Access Layer |
| HIS | Hospital Information System |
| HOBIC | Health Outcomes for Better Information and Care |
| OeHC | Ontario e-Health Council |
| OHISC | Ontario Health Informatics Standards Committee |
| OLIS | Ontario Laboratory Information System |
| PACS | Picture Archiving Communications Systems |
| PHR | Personal Health Record |
| PIA | Privacy Impact Assessment |
| TRA | Threat Risk Assessment |

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