



## Profile

Ochsner Health System (OHS) was founded in 1942, and has evolved into the largest private not-for-profit academic health system in the Gulf South Region. The OHS system consists of 30 owned, managed, and affiliated hospitals, with over 80 neighborhood health centers across the greater Gulf South Region. In addition, OHS is the largest private employer in Louisiana with over 18,000 employees, 1,100 physicians, and an additional 1,500+ affiliated physicians who serve over 90 medical specialties and subspecialties. In 2017, OHS cared for patients from over 80 countries.

OHS is consistently recognized and highly ranked among various quality centers such as Carechex, US News Best Hospitals, Healthgrades 100 Best Hospitals, and the LeapFrog group to name a few. In 2017, OHS ranked #1 in Louisiana for 12 specialties according to Carechex, and #1 in the nation for organ and liver transplants. Ochsner remains the only hospital system in Louisiana, Mississippi, and Arkansas to validate at Stage 7.

## The Challenge

The OHS system has vowed through its vision to be a global medical and academic leader who will save and change lives, as well as shape the future of healthcare through continuous innovation, growth, and

partnerships. This vision propels us to continue growth through acquisitions and partners to serve more patients. Managing our growth and continuous drive to optimize our EMR was our primary challenge. From 2014-2017, OHS expanded from 13 owned, managed, and affiliated hospitals to 29.

## Implementation Overview

OHS started the EHR journey in 2010 and partnered with Epic for a planned regional roll out. Our first inpatient hospital went live with Epic in January of 2012. Ochsner continues to implement Epic and associated clinical and financial systems each time a new partner or acquisition is added to the Ochsner system.

All nine OHS inpatient hospitals successfully re-validated HIMSS Stage 7 in October 2017. We began our initial HIMSS journey in 2014, with our OHS-North Shore campus being the first inpatient facility to achieve Stage 7 status. Each OHS inpatient hospital subsequently followed, and individually achieved Stage 7 from November 2014 to February 2017. Within that timeframe, we acquired one new OHS inpatient facility, St. Charles Parish Hospital (SCPH), who went live with Epic system in May of 2016.

OHS has set the standard that will have any newly acquired OHS inpatient facility HIMSS Stage 7 certified within their first year of go-live, by incorporating HIMSS Stage 7 requirements into all pre go-live activities and preparations. All processes and equipment are in place to meet HIMSS Stage 7 requirements, such as device integration, scanners, HIM concurrent scanning, and

CPOE & BCMA reports. Post go-live, monthly status reports are sent to all OHS leadership which include CPOE & BCMA percentages. An action plan is implemented for any facilities who fall below the requirement. With the guidance of the OHS system, SCPH achieved HIMSS Stage 7 in November of 2016, just 6 months after their Epic go-live.

## Resulting Value / ROI

### *1. Increased access to medical information through more advanced information sharing via the My Ochsner patient portal.*

- The My Ochsner patient portal provides patients access to diagnostic studies, notes, and visits promoting communication from patients to their doctors and care team.
- In 2014, OHS became the first Epic system client to successfully integrate the new Apple HealthKit into its EMR, making it easier to upload and integrate patient's clinical data into their patient record at the physicians' recommendations.
- In 2017, OHS proudly began the Connected Mom (Maternity Online Monitoring) program. This digital medicine program allows expectant mother with low risk pregnancies to use technology at home, such as wireless scales, blood pressure cuffs, and urine protein test kits to help manage prenatal health. Using their smartphones, patients can send their results directly to their My Ochsner patient portal, which connects directly to the EMR where a specialized care team then reviews the data and makes necessary recommendations. The program reduces the number of required in person visits by an average of 3, and helps

identify issues such as high blood pressure and excessive weight gain earlier. This is the first program of its kind created by a healthcare system, and Ochsner is the only hospital in the Gulf South region to offer this technology to its patients.

### *2. Integration and use of the EMR to improve CAUTI rates.*

- In 2013-2015, our system CAUTI rate was above the benchmark of 1.0. To improve, multiple interventions were implemented including standardizing processes to review orders for insertion, duration, and necessity of indwelling catheters. We also created a nurse-driven Foley removal protocol and policy, and a new Foley order panel for ordering 'Foley to gravity' with the nurse-driven removal protocol embedded inside. In addition, post procedure order sets received a hard stop to address Foley removal, and Foley BPA's were created to remind nursing and physicians to remove Foley's after 48 hours if indicated. Flowsheet documentation rows allow staff and physicians to monitor the patient's progress.
- These interventions resulted in a decline in CAUTI Rates in 2015-2016. OHS met the system benchmark of 1.0 in 2016, with two facilities even achieving 0 CAUTI's.

### *3. Expansion of our telemedicine programs and service lines to reach more patients, decrease length of stay, and promote patient safety.*

- In 1998, OHS initiated its first telemed program in pediatric cardiology for pediatric echocardiograms.

- In 2009, OHS began our fastest growing program to date, TeleStroke, which has produced 4-fold higher TPA administration rates for stroke patients.
- In 2012, TeleICU began. This program is active in all OHS ICU units, covering over 200 beds, serving over 40,000 patients, and produced over 18,000 avoided days for our system.
- In 2015, OHS added specialty services of Cardiology, Nephrology, Pediatrics/PICU, Maternal Fetal Medicine, Infectious Disease, and Wound Care to our telemed service lines.
- In 2016, the Telestork Program was implemented, providing remote monitoring of L&D patients at most of our OHS hospitals. The Telestork program has monitored over 1,200 patients and has reduced NICU and c-section rates.
- In 2016, TelePsych, E-sitter, and Epic Virtual Visits were implemented. Our TelePsych program produced 30% fewer admissions and 55% shorter ED waits. The E-sitter program reduced our falls from 6.04 to 0.09 per 1,000 patient days.

#### *4. Significant Cost Savings in HIM from reduction of Transcription & Paper Volume*

- From 2013 to 2017, the OHS HIM department continued to reduce both volume and the cost of transcription via targeted efforts to transition documentation into Epic. Some of these efforts included a system focus on customized templates, problem oriented charting, and voice recognition programs. These efforts resulted in a cost savings reduction from \$1,036,911 in 2013 to \$287,095 as of May 2017.

## Lessons Learned

- OHS administrative and provider buy-in is critical to maintaining all HIMSS Stage 7 requirements, especially our CPOE percentages. Our administrative leaders and physician champions are key players in helping to keep these standards at the forefront for all staff.
- To achieve success for new OHS inpatient facilities, we must incorporate all HIMSS Stage 7 requirements into Epic pre go-live and planning activities, and clearly communicate that achievement of HIMSS Stage 7 is expected for our new OHS facilities within their first year of Epic go-live.
- Super user and physician champion utilization is instrumental for successful implementation of new facilities, as well as for ongoing support and effective use of the EMR post go-live. These clinicians are key in helping end users effectively use the EMR, as well as maintain best practices and standard of documentation requirements.

***“We are thrilled to be honored as a HIMSS Stage 7 organization in 2018. Due to the dedication and vision of our clinical and informatics teams, as well as the support of operations, we are able to leverage the best technology to provide superior care for our patients.”***

- Amanda Jackson, Associate Chief Medical Information Officer, Ochsner Health System