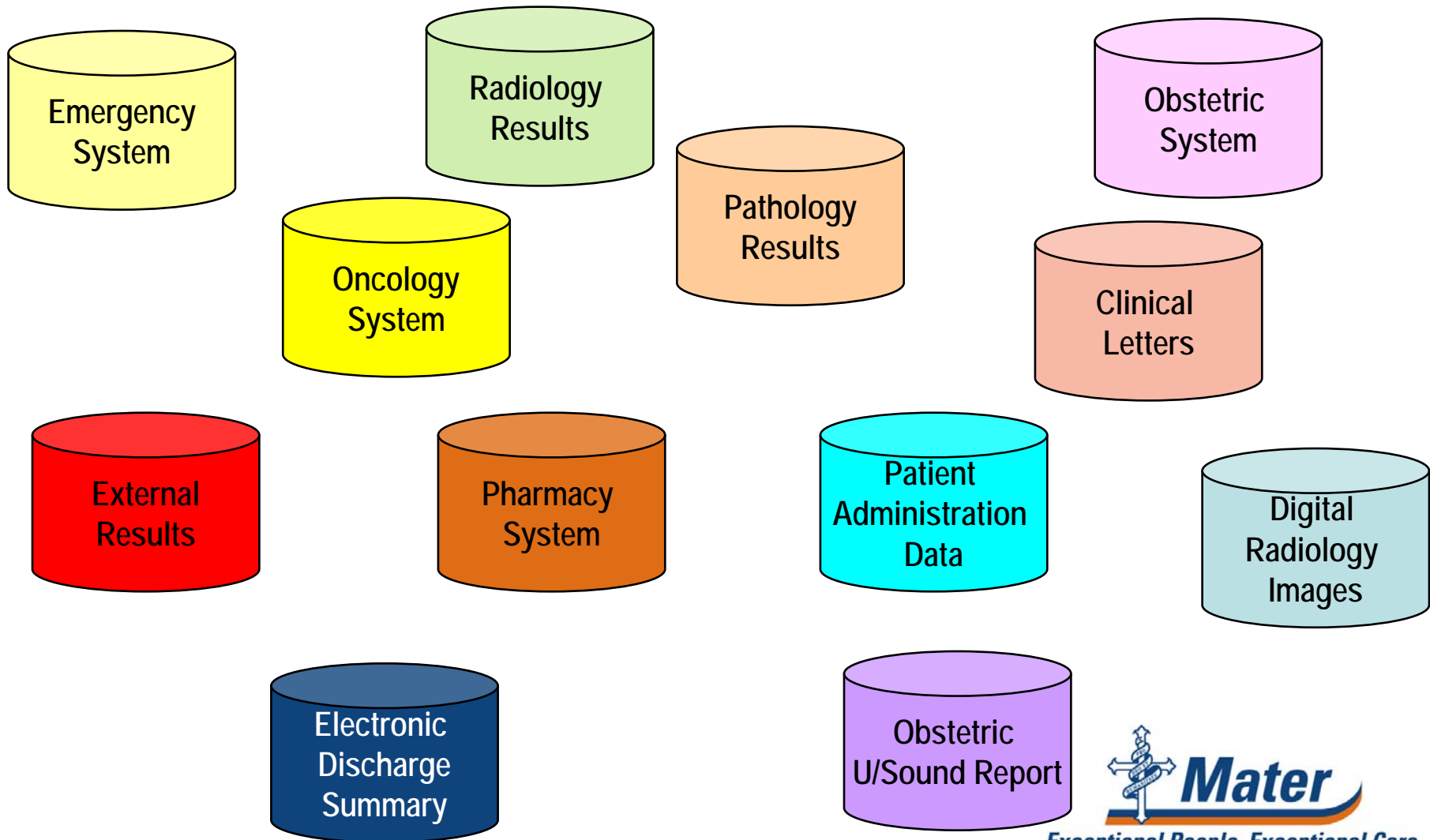**Mater**

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Clinical Portal Proof of Concept

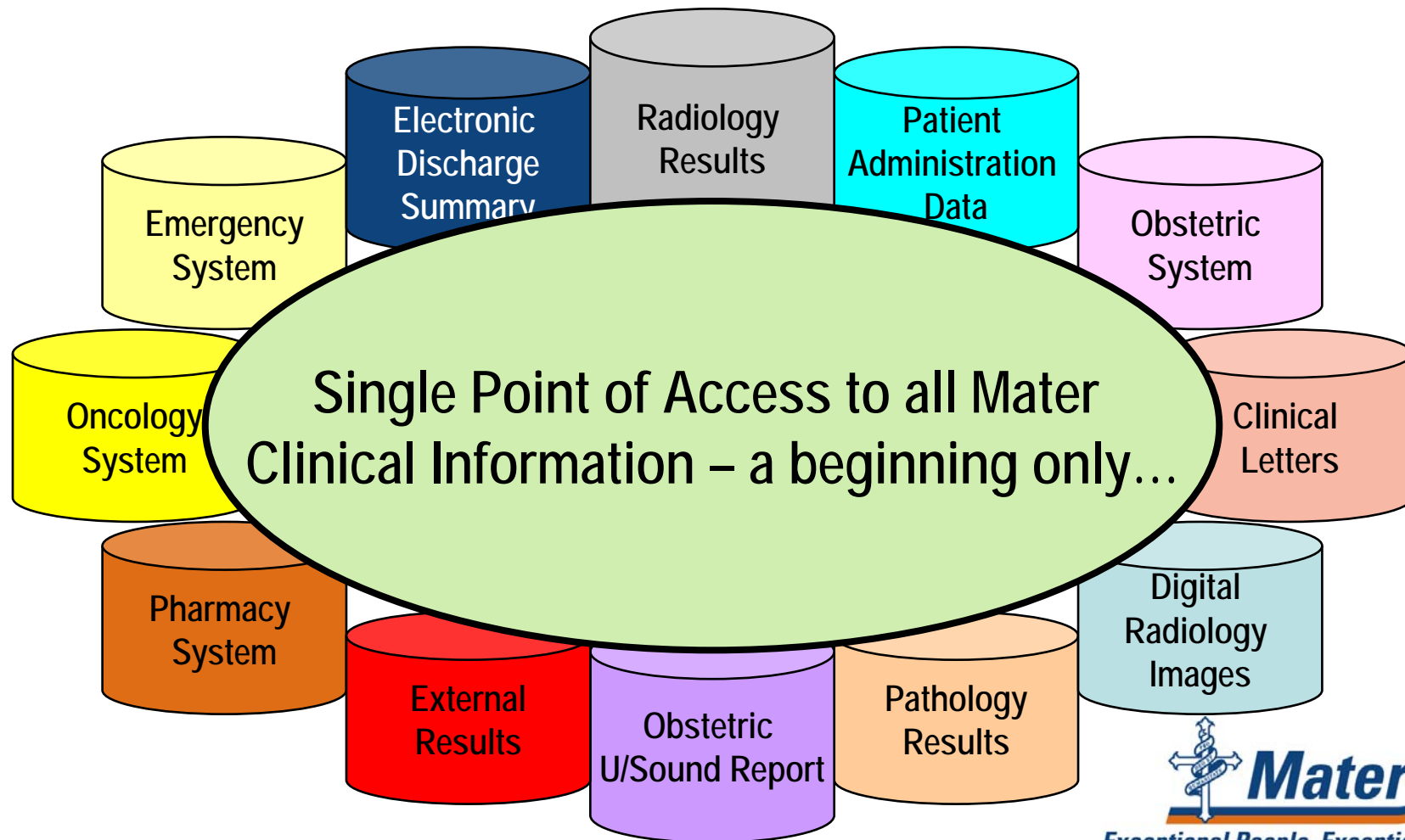## Michael Strachan - EHR Program Manager

Mary-Ellen Vidgen – Senior Project Officer

Many Disparate Systems...

Clinical Portal – the solution?

Why Proof of Concept (POC)?

- Cynicism regarding the value and failures of electronic records in hospitals

- Evaluate the benefits of an EHR solution in a live clinical environment
  - Be prepared to cease EHR project if no proven value

- Proof of concept enables an informed decision regarding an appropriate solution

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Proof of Concept Objectives

- Live pilot implementation to evaluate the value of a Clinical Portal
- Assess organisational readiness
- Understand the importance of configuration of software to underpin clinical processes
- Understand implementation approach including resourcing, critical success factors and priorities

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Software Solution = VERDI

- Commercialised software solution originally developed by Peter MacCallum Institute for clinicians

- Mater is the first site to pilot this solution outside Peter Mac

- It is a low cost, unique solution which can be implemented within a relatively short space of time

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POC Overview

- 6 months pilot
- Mater Mothers' and Adult Respiratory clinical teams
- Key functions of the clinical portal:
  - Results acknowledgement
  - Access to pathology, radiology, departmental clinical information systems, outpatient clinical letters, PAS and external investigations

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Governance & Engagement

- Strong clinical engagement and sponsorship – Mater clinical directors determined go or no go decision from pilot to enterprise

- Collaboration with clinicians regarding configuration of the product, training and support was critical to utilisation

- Flexible solution to underpin clinical processes is essential

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Lessons Learnt

- Local control over configuration of EHR solution demonstrated ability to be responsive and meet clinician requirements

- Until the product is utilised within a real work environment it is difficult to appreciate the usefulness or impact on clinical processes

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Lessons Learnt

- Process of undertaking a live usage of the product has empowered, engaged clinical community enthusiasm for an EHR

- Clinician engagement and processes is fundamental and the software solution must underpin clinical workflow

- Mater's approach is most effective in a highly best of breed environment

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Issues

- Data quality in local departmental CIS
- Complexity of integration with systems and messaging
- Critical to have strong IT infrastructure and technical software support on site
- Being the first site, uncharted waters for development can be challenging
- Realistic management of clinicians expectations is critical

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Mater's Experience

- 6 months usage to decide on product vs demonstration of products
- Reduced risk of wasting millions of dollars on software which may not meet requirements of clinicians
- Learn what and what not to do for enterprise roll out
- Engaging and assessing organisational clinician readiness for change

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Is a POC for everyone?

- Commitment of executive and clinicians to risk starting again

- Not suited to all software solutions in the market place

- It vaguely resembles a more scientific approach to system selection

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Future Utilisation of POC

- POCs will be utilised wherever possible as a precursor before large scale implementation

- Need to rethink resourcing model to enable POC prior to complete business case for EHR solutions

- POCs increase potential for success over traditional IT procurement and implementation planning study model

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