

ARMS Head and shoulders above, says Mount Sinai

BY BRIAN EATON

In the race to provide innovative solutions to health care services for patients across all ambulatory care services, one major hospital appears to have put its horse between two carts. But clinical and IT staffs are working together on an organization-wide initiative – and they report that success beckons.

Toronto's Mount Sinai Hospital (MSH) is accelerating the adoption of technology among health care providers on an integrated, patient-centric model, says the hospital's senior tech manager.

Dr. Lynn Nagle, senior vice president, Technology and Knowledge Management at MSH, said the hospital was already moving forward with an electronic medical record (EMR) strategy for care in the in-patient environment. But ambulatory areas had been separated from the rest of the hospital information system.

"Over the last couple of years we have focused, very aggressively, on getting the ambulatory areas to just register their patients in the Mount Sinai system," Nagle said. "That laid the foundation to have an integration of other functions, like the Ambulatory Record Management System (ARMS)."

ARMS is expected to include at least 500 physicians and residents operating out of 130 ambulatory clinics. It will allow medical professionals to automate their clinics and integrate clinical patient information currently collected by the hospital systems.

"This project represents the foundation for the creation of the integrated Electronic Health Record (EHR) across the entire MSH organization," Nagle said. "It accelerates our plan to create a central patient repository and a platform to seamlessly connect all stakeholders. It will provide real time access to critical information to all care providers and enable patients to review their medical records and communicate with their physicians."

Nagle said many of the MSH clinics have run their own systems, acquired in-

dependently and not integrated with the rest of the hospital information system. Against that backdrop, Darin Meilleur was brought on in late March to steer ARMS.

"I get the clinics on board, sell it, develop the strategies and processes – all the typical things that a project manager would do," said Meilleur, ARMS project manager. "We have three early adopters on board who were clinics that were involved with the vendor selection process. They want this system sooner rather than later."

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"Since we started talking about it, people are coming out of the woodwork," Nagle added. "It is obvious that people see the benefit, and from my point of view, the benefit is primarily to the clinicians and their interdisciplinary team whose records used to be fragmented."

Meilleur said that once MSH has its first clinic up, others will be approached about buying into ARMS.

"At this point it is a little premature because we don't have a system we can show them," Meilleur said. "I am reluctant to go out there and do full selling before we have something we can physically show clinics." The new program allows a single access point for input from physicians, nurses, nutritionists and others, according to Nagle.

MSH will license Nightingale Informatrix Corporation's Enterprise Practice Management and Electronic Medical Record tools for ARMS.

The Nightingale system is an ASP solution that is delivered through a secure web connection and two-factor authentication capable of managing multiple physical locations in real time. It is to be integrated with the existing systems of MSH to exchange information for diagnostic imaging, laboratory results, pharmacy, scheduling and ADT. It will allow MSH to provide an integrated EHR solution on a central platform, while eliminating the burdens associated with conventional EHR solutions, according to Nightingale.

MSH conducted a formal review process for the ARMS project before deciding to proceed with Nightingale.

"Our selection committee undertook a rigorous due diligence process and selected the Nightingale system as the best fit for the needs of our clinics," Nagle said. "We can extend, by virtue of economies of scale, a pretty attractive cost model that (ambulatory clinics) couldn't get on their own – because of the order of magnitude of the project."

Nightingale CEO Sam Chebib said his company's appearance at MSH is probably one of the first of its kind in a major hospital setting.

"The key thing is to provide an enterprise solution where each patient that walks into the hospital has a unique patient record," Chebib said. "The way to accomplish that is to allow the physicians to use (Nightingale's) application to automate their office."

Chebib said some of the in-patient information currently available in MSH's legacy system would be transferred to physician records.

The system that MSH is using is identical to systems Nightingale has provided to the private sector across Canada. It can accommodate two to three thousand physicians, according to Chebib. www.nightingale.com 057253

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