



Timely Data: An Rx for High-Performance Emergency Departments

Emergency department success depends on technology that efficiently integrates workflow and clinical data

Marian Moran, CHIEF INFORMATION OFFICER, ST. MARY MEDICAL CENTER, LANGHORNE, PA.

A 20-year healthcare management veteran, Marian Moran has worked in IT for 14 years.

Healthcare and hospital CIOs today face many challenges, including using technology to support clinical and financial goals while guiding their organizations through the minefield of changing federal regulations and compliance. Marian Moran, CIO of St. Mary Medical Center in Langhorne, Pa., uses the Picis ED PulseCheck® solution to successfully integrate emergency department (ED) clinical reporting and documentation into the rest of her hospital's information system.

How does a high-performance emergency department help St. Mary Medical Center achieve operational and clinical success overall?

We run a very high-acuity facility, so the need for a high-performing emergency department is essential. At St. Mary, 68 percent of inpatient admissions come through the emergency department—it is the “front door” of the hospital. By having the technology to manage the workflow, we can better track and move patients, which creates additional capacity. A successful ED is better for patients and the financial health of the system.

How has technology helped you with the challenge of weaving together the goals of the staff and the demands of the workflow?

Despite our ED volumes being up 20 percent over the past two years, we consistently get a patient satisfaction rating that is above 90 percent. Our employee and

staff satisfaction is in the 94th percentile. Before, we sometimes had to divert ambulances to other hospitals because of overcrowding. Since improving our workflow processes, diversions are rare. Using Picis ED PulseCheck, we post ED outcomes so that our colleagues can see how they are doing against the goals.

What features are you seeking when assessing technology for the ED?

The workflow has to be easy to use, efficient, flexible and intuitive—it's important that clinicians be able to “own” the workflow. The technology also must facilitate the workflow throughout the rest of the institution—the clinicians need to see information in a timely manner so that they can see their particular role and duties in the care of a patient. And it has to be able to capture data in order to assess patient outcomes. ED PulseCheck accomplishes this.

How has ED PulseCheck been integrated into your overall technology solution?

We have many points of integration. All of our doctors already do computerized order entry, which passes through our primary hospital information system. For instance, orders from the ED can pass over to the cardiologist, and if there is information on a patient's allergies, that can be passed on to the pharmacy. PulseCheck integrates well with our primary system, and it is a very safe, secure

way for the patient history to flow through the hospital. The flow of information is bi-directional among departments, and we are going to be expanding the automatic updating of discrete data elements such as vital signs. Picis is working with us to integrate the ED even further into the hospital system, which will make the ED even more effective.

How does ED PulseCheck fit into St. Mary's strategy and plan for meeting the “meaningful use” requirements as defined by the ARRA Healthcare IT Stimulus Act?

The nomenclature that is being developed around the term “meaningful use” is going to be critical, and we will need to be able to compare apples to apples when measuring the patient experience. We are working with Picis to make sure that the right information will be captured from our clinical content to ensure that we are being patient-centric and getting the right information to meet the new requirements.



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