

Are You Connected?

By Thomas Peth

Connected care – necessary to thrive

Connected care will quickly become a necessary mindset to deliver quality patient-centered care. Agencies that are equipped to share patient information with the entire spectrum of health care providers will improve patient care and have a competitive edge, which will position them to succeed.

There is a national campaign for connected care and New York State has joined this cause with its dedication to improve the coordination of health care through the use of health information technology. In September 2010 New York State announced that \$109 million in state grants would go towards this effort.

Connected care expands with health information exchanges

The federal government granted \$548 million to enable the exchange of health information across the health care system through the State Health Information Exchange Cooperative Agreement Program. This program has jumpstarted Health Information Exchanges (HIEs) across the nation. HIEs provide a solution to transport clinical information through multiple providers and information systems. This secure approach to access and retrieve clinical data in a quick and efficient way allows physicians and clinicians to provide a high standard of care through multiple providers.

The \$109 million in New York State grants will support projects that help build health information technology infrastructure, improve delivery and coordination of patient care with a focus on mental health, long-term and home care in New York State. The funding for these grants is being provided by the state Department of Health (DOH) and the Dormitory Authority of the State of New York (DASNY) through Phase 17 of the Health Care Efficiency and Affordability Law of New York (HEAL NY) and the Federal State Health Reform Partnership (F-SHRP), which supports efforts that improve the efficiency and affordability of New York's health care system.

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One beneficiary of the above mentioned grant is the Long Island Patient Information Exchange (LIPIX) www.lipix.org. LIPIX, an independent not-for-profit corporation established to develop a Regional Health Information Organization (RHIO), was awarded \$20 million from this grant.

LIPIX is the first independent HIE to electronically transfer live data across multiple unaffiliated health care organizations in the New York metropolitan area. The organization currently works with about 25 hospitals/health care systems and has access to 3 million patient records across Nassau, Suffolk and Queens. Currently, more than 2,000 clinicians have access to the LIPIX system.

Connected Care, HIEs and home care – putting the pieces together

HCA Member Gurwin Jewish Nursing & Rehabilitation Center LTHHCP (www.gurwin.org), located in Commack, NY, will soon experience the benefits of connected care via its electronic medical record (EMR) technology and LIPIX.

Gurwin has been in operation since 1997 and serves about 125 home care patients throughout Suffolk and Nassau counties. In order to consider partnering with a Health Information Exchange (HIE), Gurwin first needed to implement an EMR system that supports data exchange to an HIE. In 2008, Gurwin selected Thornberry Ltd (www.thornberryltd.com) as its technology partner and rolled out the company's EMR software NDoc®. They selected NDoc® based on its robust clinical functionality and its rapid information exchange technology, NCompass.

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As Gurwin was establishing its new EMR system, LIPIX was gaining momentum. The HEAL NY-Phase 17 grant encouraged LIPIX to focus on educating home care agencies on the advantages of its health information technology infrastructure and the benefits for delivery and coordination of patient care. Gurwin quickly recognized the capabilities of LIPIX and the advantages it would offer their agency.

Gurwin is working with its EMR partner, Thornberry, to develop an interface to easily exchange information with LIPIX. According to Joanne Parisi, Chief Information Officer for Gurwin Jewish Nursing & Rehabilitation Center, the expected benefits include improvements in efficiency, automation, quality of care and patient safety.

“The transition of care will be drastically enhanced; Gurwin staff will have immediate access to patient information such as testing, lab results and other pertinent information. This will provide our clinicians with accurate patient health information and save dollars on performing unnecessary repetitive tests. LIPIX will also be able to automatically inform our staff when a patient has been admitted to the hospital. We believe these benefits along with others will improve patient quality of care as well as increase agency efficiency,” said Joanne Parisi.

In this new world of connected care, one thing is certain: rapid connectivity, participation, coordination and communication are key to ensuring quality care transitions between providers; a crucial adjunct to that effort involves agencies choosing an EMR system that can achieve tight integration, enabling connectivity to the entire health care continuum. Home health and hospice organizations must critically examine their ability to connect to the full continuum of care – or risk being unable to compete in the marketplace.

Thomas Peth is the President of Thornberry Ltd., creator of NDoc® home care and hospice management software. Thornberry will be exhibiting at the upcoming HCA Annual Membership Conference on May 22 to 24. Visit them at booth No. 4.