

# O N E M C L A R E N

Sharing information about the McLaren Health Care transformative systems projects | April 2017

## Cerner System Training

*Coming to a Classroom Near You!*

System training will be coming to a classroom near you sooner than you think. Classes will begin six weeks before your site converts to Cerner. The schedule will be available three months before the classes begin. The curriculum is set up like a college program. You will sign up for required courses through McLaren University. This will allow us to track and monitor enrollment and completion status for each user. The different levels of courses in the curriculum include 100, 200, 300 and 400. Courses are role based and thus assigned relating to the role or roles you perform.



The **100 Level** course is a brief introduction to Cerner. This 15-minute video will provide an overview allowing you to become familiar with the look and feel of Cerner Millennium.



The **200 Level** course is a foundation review as it relates to the role you perform. A registered nurse will take the appropriate registered nurse course as it relates to his/her role (such as cardiology, inpatient versus outpatient). This face-to-face course includes a demonstration of functionality and allows time for a return demonstration of the system. You will need to complete a competency test for this level.



The **300 Level** courses are specialty lessons, such as Cardiology, Interventional Radiology, and Critical Care Nursing.



The **400 Level** course is a lesson to practice what you have learned with hands-on learning. This occurs when utilizing a simulation or scenario similar to real life or daily activities. Practicing situations you will be exposed to will decrease frustration and anxiety. This course will be competency based and again, role specific. Practicing what you have learned is the best way to prepare for your Go Live.

Classroom size will be limited to less than 8 for providers and less than 15 for all other courses. You will be required to complete training and competencies to obtain access to the Cerner

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# Emergency Departments Prepare for Evolution in Flow of Care

**David Steele**, Manager of Patient Care Services for Emergency Services at McLaren Bay, and **Emily McKie**, Cerner Emergency Department Solution Lead, discuss features of the new ONE McLaren project making the biggest impact on Emergency Department workflow. Here, they share how the expected changes guide their communication and planning for the roll out.



## What are some of the major changes you expect to see in Emergency Departments (EDs) as part of the ONE McLaren project?



Many providers are still completing documentation via paper t-sheets and utilizing unit coordinators or clinical staff to place verbal orders versus electronic documentation and placing the orders themselves. Unit coordinators will not have access to place verbal orders, and verbal orders placed by nurses should be limited to emergent situations to ensure CPOE. Electronic documentation and CPOE ensures documentation is clear and positively impacts patient safety as well as reimbursement. Also, more descriptive nursing and provider order entry will increase the ability to generate more accurate revenue.



## How will the “clinically driven revenue cycle” impact EDs?



It is designed to be a more detailed approach to capturing charges for both supplies and procedures. The Cerner system will be able to drive the front line staff to provide the appropriate documentation necessary to ensure the appropriate billing and revenue generation.

### PROGRESSION

Completed

2015

FALL 2015  
Current State Reviews

2016

2016  
Future State Reviews and Validation

Here AND Now

2017

WINTER/SPRING 2017  
• Clinical Build, Rev Cycle Build and System Testing



### How will FirstNet affect ED employees? How will it affect providers?

Front line staff workflows will need to be adjusted to accommodate the transition from paper to electronic documentation and physician order entry. This is especially true for providers where the norm during high volume times is to see several patients before having the unit clerk enter the orders into the computer. They will have to adjust their workflow to continue their patient-per-hour productivity, while assuming the role of order entry.



### What "wins" will FirstNet bring to the ONE McLaren project?

**WIN:** One win from a Revenue standpoint is hard-stopping the IV Stop time (not including IV Pushes). IV stop times are required by CMS in order to appropriately charge for the IVs, and we have this required in order to depart the patient.



**WIN:** We will now have a system that easily interacts with, and provides, real time visibility to other departments that interact with the Emergency Department. Department metrics and reporting will now be consistent amongst the subsidiaries. Currently, data is being collected by different methods in each of the subsidiaries. Consistency among sites allows for accurate comparison and helps sites determine best practices.



### How can system users start to change their mindset today?

Preparing for CPOE will be huge for providers who currently place verbal orders through nurses or unit coordinators. Unit Coordinators will not have access to place orders on behalf of providers.



Subsidiary representatives working on the ONE McLaren project should provide consistent updates to their respective organizations and departments. The more transparency and insight we provide early in the project, the better prepared each subsidiary will be at the time of their respective Go Live dates.



**WIN:** Cerner CPOE will move information much faster as the orders will go to the respective department upon entry by the provider. There will be no "middle person" to push the orders to their final destination.



**WIN:** There will be better visibility to patient visits across subsidiaries – meaning Flint will be able to see documentation on a patient's visit at Northern or another subsidiary (if applicable).

## Future

## 2017

### JUNE/JULY 2017

- Integration Testing Phase 1

### JULY/AUGUST 2017

- Integration Testing Phase 2

### SEPTEMBER 2017

- Integration Testing Phase 3

### OCTOBER 2017

- 10/9: Super User training begins for Lansing
- 10/16: System training begins for Lansing

### DECEMBER 2017

- Lansing Go Live

### FEBRUARY 2018

- Northern Go Live

### APRIL 2018

- Bay and Central Go Live

### JUNE 2018

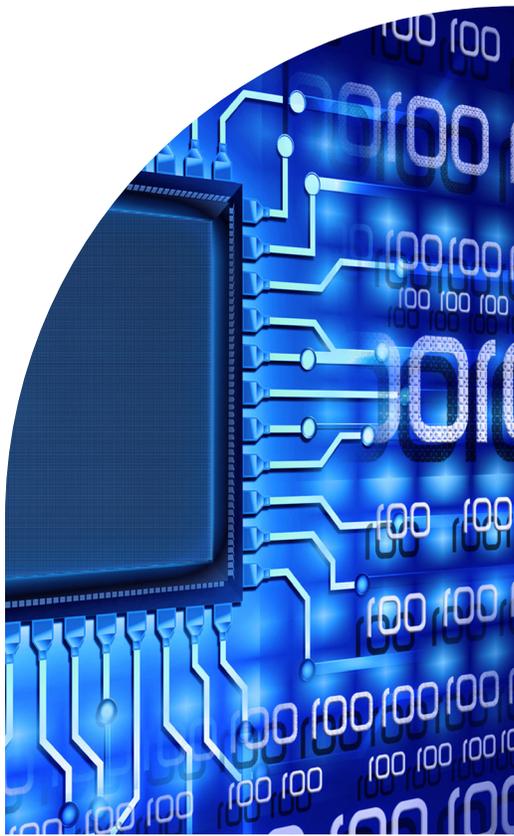
- Oakland and Macomb Go Live

### AUGUST 2018

- Flint and Lapeer Go Live

### DECEMBER 2018

- Karmanos (Detroit) Go Live



# Have you ever wondered what the ONE McLaren project is all about?

It is important to understand “Why” we are doing what we are doing. We recently asked **Lisa Zajac**, Nursing and Ancillary Lead, what inspires her about this project. Lisa has been instrumental in moving this project along specifically as it relates to nursing.



“Standardization, Standardization, Standardization! When planning for ONE McLaren content, I often ask for what is being documented in current state so that we can plan for future state. Not once have I ever received information that was the same across the subsidiaries. For ONE McLaren, we are utilizing national standards and guidelines to drive the system design, and are developing content that can be used throughout the McLaren system. I look forward to the day when we can speak about documenting in “ONE” EMR, not “our” EMR, like it is in the current state.”

## PeopleSoft

### What’s happened so far?

Since late November, the PeopleSoft Team has been performing integrated testing cycle one with focus on third party integration system, customization, and conversions. Testing for cycle one is scheduled for completion at the end of April. Solutions testing within scope of cycle one include:

Workflow	Optum Scanning	Check Printing
Banking interfaces	Allocations	Combination rules and validations

### What’s coming up?

Over the next few months PeopleSoft Financials & Supply Chain Management teams will continue to work on integrated testing cycles one through two, and will continue to perform data validations. The successful completion of integrated testing and data validations will support the final testing cycle which is performed by system users. This testing cycle is commonly referred to as “User Acceptance Testing (UAT)”. The PeopleSoft project is on track with the initial Go Live of December 2017, in alignment with the Cerner Go Live.

## Cerner System Training

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Millennium environment. Currently, we are finalizing the location of classrooms for each wave. It is our intent to limit travel time and inconvenience. Please watch for a more specific course schedule and be aware of the training that is coming to your site.

It is our goal that system training will provide you with what you need with consideration for both your time and work schedule. For many of the clinics, this may require you to attend Saturday or late evening courses. We are planning on providing enough courses to meet your needs at various times and days of the week. We will be working closely with your site’s management team to provide a flexible schedule for your training needs.

For further information please contact Mary Whyte-Marshall, ONE McLaren Adoption/Education Lead, at [mary\\_marshall@mclaren.org](mailto:mary_marshall@mclaren.org).