

# EMR Transition Plan

## <Clinic name>

Date: \_\_\_\_\_

Draft:  Final:

Prepared by:

\_\_\_\_\_  
PITO Relationship Manager

Reviewed by: \_\_\_\_\_ (Clinic Lead)

**1. Purpose & Audience**

This document is a planning tool between your Clinic, PITO and the EMR vendor to set expectations; identify process changes, risks, and timelines; and to support the achievement of the practice’s implementation and clinical goals.

**Clinic Message:** This is your document. If it doesn’t reflect what you have said, or is missing something, then inform your PITO Relationship Manager. You are not obligated to share the content of this plan with your vendor, although it is worthwhile to do so. *This document is an integral part of your engagement with your vendor, clinic status updates, and your Post Implementation Review.*

**2. Project Drivers: (from boardwalk questions) – What do you hope to achieve with an EMR?**

Driver/Source (e.g. MD, MOA...)	Success Criteria?	By When? (Target date)
▪		
▪		
▪		
▪		

**3. Clinic Summary: \*see PITO Clinic Profile Document for more information (Attach Clinic Profile at end of document)**

**(Include Clinic Narrative/Executive Summary here)**

i) Practice Contact Information:

Address	Telephone	Fax
Primary contacts (*= primary project contact)	Role	Email
	MD lead	
	MOA lead*	
	PPN	

ii) Practice Size:

Number of Physicians	
Number of Office Staff	<ul style="list-style-type: none"> <li>▪ MOA:</li> <li>▪ Nurses:</li> <li>▪ Other (please specify):</li> </ul>

iii) Practice Overview:

Practice Overview/ General Observations	
Areas of Unique Focus/ Interests	

**4. Discussed Implementation and Timeframe: (What clinic wants and what Vendor has given)**

Action	Date	Considerations

**5. Project Expectations & Needs:**

Process	Desired Requirements & Specific Training Needs	Major Process Changes <sup>1</sup>	Joint Expectations/ Commitments (Clinic, Vendor, Both)
<b>EMR Forms and Clinical Data-Entry Templates:</b>			
<b>Clinical Data-Entry/Patient Assessment Templates</b>	▪ List	▪	C: <input type="checkbox"/> V: <input type="checkbox"/> Both: <input type="checkbox"/>
<b>Letter Templates</b>	▪ List	▪	C: <input type="checkbox"/> V: <input type="checkbox"/> Both: <input type="checkbox"/>

<sup>1</sup> To be discussed during PITO & Vendor Engagements and updated following each meeting.

Process	Desired Requirements & Specific Training Needs	Major Process Changes <sup>1</sup>	Joint Expectations/ Commitments (Clinic, Vendor, Both)
Order/Patient Service Templates	<ul style="list-style-type: none"> <li>List</li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>	C: <input type="checkbox"/> V: <input type="checkbox"/> Both: <input type="checkbox"/>
<b>Clinical Functional Requirements</b>			
Referral Process		<ul style="list-style-type: none"> <li>MD to select data to create referral letter in EMR and select data to include directly. <input type="checkbox"/></li> </ul>	C: <input type="checkbox"/> V: <input type="checkbox"/> Both: <input type="checkbox"/>
Rx Management		<ul style="list-style-type: none"> <li>Medications that require Triplicate Forms will still need to be completed manually <input type="checkbox"/></li> <li>Will clinic be installing printers in each exam/treatment area to generate Rxs and requisitions? <input type="checkbox"/></li> </ul>	C: <input type="checkbox"/> V: <input type="checkbox"/> Both: <input type="checkbox"/>
Dictation and Transcription		<ul style="list-style-type: none"> <li></li> </ul>	C: <input type="checkbox"/> V: <input type="checkbox"/> Both: <input type="checkbox"/>
Images and Drawing		<ul style="list-style-type: none"> <li></li> </ul>	C: <input type="checkbox"/> V: <input type="checkbox"/> Both: <input type="checkbox"/>
Population Health		<ul style="list-style-type: none"> <li></li> </ul>	C: <input type="checkbox"/> V: <input type="checkbox"/> Both: <input type="checkbox"/>
Results Management		<ul style="list-style-type: none"> <li></li> </ul>	C: <input type="checkbox"/> V: <input type="checkbox"/> Both: <input type="checkbox"/>
<b>Administrative Functional Requirements</b>			
Scheduling/ Registration/ Check-in		<ul style="list-style-type: none"> <li>MOA can use EMR to notify MD who the next patient is.</li> </ul>	<ul style="list-style-type: none"> <li>Clinic to confirm new notification process <input type="checkbox"/></li> </ul>
Billing		<ul style="list-style-type: none"> <li>MD to select billing code during clinical documentation</li> <li>MOA to review and submit</li> <li>No change is expected to non in-practice encounters (i.e. hospital visits) workflow. <input type="checkbox"/></li> <li>Discuss practice billing report requirements. <input type="checkbox"/></li> </ul>	C: <input type="checkbox"/> V: <input type="checkbox"/> Both: <input type="checkbox"/>
Internal Communication		<ul style="list-style-type: none"> <li>Tasks can be recorded in EMR</li> </ul>	<ul style="list-style-type: none"> <li>Use of functionality to be determined by practice. <input type="checkbox"/></li> </ul>
Disaster Recovery Plan	<ul style="list-style-type: none"> <li>Business Continuity Copy (BCC)</li> <li>Uninterruptable Power Supply (UPS)</li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>	<ul style="list-style-type: none"> <li>Clinic to determine need for UPS <input type="checkbox"/></li> <li>Vendor to provide training and ensure process works in clinic. <input type="checkbox"/></li> </ul>
<b>EMR Electronic Input/Output Capability</b>			
Interface	<ul style="list-style-type: none"> <li>Excelleris</li> <li>Medinet</li> <li>Health Authority</li> <li>Other</li> <li>PACs images</li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>	C: <input type="checkbox"/> V: <input type="checkbox"/> Both: <input type="checkbox"/>

Process	Desired Requirements & Specific Training Needs	Major Process Changes <sup>1</sup>	Joint Expectations/ Commitments (Clinic, Vendor, Both)
<b>Electronic Fax</b>	<ul style="list-style-type: none"> <li>Desire for all faxes to be <u>received</u> electronically?</li> <li>Desire to <u>send</u> documents electronically from EMR via fax?</li> </ul>	<ul style="list-style-type: none"> <li>All incoming faxes will be saved to computer and MOA will match with patient record and import into EMR</li> <li>Practice will maintain separate fax address book and select recipient for each fax sent (vendor dependent –confirm)</li> </ul>	<ul style="list-style-type: none"> <li>Clinic to setup <input type="checkbox"/></li> <li>Vendor to configure import folder <input type="checkbox"/></li> </ul>
<b>Scanning</b>		<ul style="list-style-type: none"> <li>MOA will scan all relevant incoming mail, match with patient and import into EMR</li> <li>Clinic to determine if documents will be reviewed by MDs in EMR, or be scanned after review and a follow-up done on paper.</li> <li>Major workflow changes and staff allocations may be associated with this function.</li> </ul>	<ul style="list-style-type: none"> <li>Clinic to ensure scanner is compatible with EMR <input type="checkbox"/></li> <li>Clinic's IT support required to set up scanning folders &amp; network the PCs to enable sharing of document mgmt. tasks <input type="checkbox"/></li> </ul>
<b>Other</b>			C: <input type="checkbox"/> V: <input type="checkbox"/> Both: <input type="checkbox"/>

**6. Data Conversion Summary: Refer to supporting documents listed on page 5 for a detailed Data Conversion document**

Data	Desired Requirements	Joint Expectations (Clinic and Vendor)
<b>Demographics</b>	Convert all demographic information. (Demographic information includes: Patient Name, DOB, PHN, Address, Phone number)	<ul style="list-style-type: none"> <li>Clinic to request file from previous provider with assistance from Vendor; Vendor to import at no cost. Previous Provider may charge for this work.</li> <li>Are there elements in previous Demographic area that will not be converted to new system. E.g. Family Member relationships, alternate names/aliases, special notes areas that may contain notifications to staff regarding No Shows, do not book information.</li> <li>Do any areas in patient demographics contain clinical information</li> </ul>
<b>Scheduling &amp; Billing</b>	Scheduling data conversion?	<ul style="list-style-type: none"> <li>Forward booked appointments are often not converted</li> <li>Time will be required to enter forward booked appointments prior to go-live in Billing and Scheduling.</li> </ul>
<b>Clinical (EMR to EMR)</b>	Does clinic presently use any clinical functionality in the existing Billing and Scheduling software? (e.g. Lab results, dictated letters, etc.)	<ul style="list-style-type: none"> <li>Complex data conversions require additional consideration, contact your PITO Representative and your Vendor for more information / planning</li> </ul>

**7. Remote Access:**

User	Desired Requirements	Joint Expectations (Clinic and Vendor)
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User	Desired Requirements	Joint Expectations (Clinic and Vendor)
<b>Doctor</b>	<ul style="list-style-type: none"> <li>▪ Access from home <input type="checkbox"/></li> <li>▪ Access from local hospital <input type="checkbox"/></li> </ul>	<ul style="list-style-type: none"> <li>▪ PITO to arrange for VPN tokens</li> <li>▪ Vendor to provide remote access documentation</li> <li>▪ Clinic responsible for configuring remote personal computer(s)</li> <li>▪ PITO to work with Health Authorities) Local IT to assist with testing.</li> </ul>
<b>Staff</b>	To be confirmed	<ul style="list-style-type: none"> <li>▪ Each practice is allocated one token per physician and one additional Administrative Staff token</li> <li>▪ Additional token requests are considered on an “as needed” basis</li> </ul>

**8. Project Risks & Challenges:** Risks are determined through engagement with practice leads and staff and through a comparison of your situation to other similar projects and their implementation experiences. Your PITO Relationship Manager has categorized these according to the Critical Success Factor that is impacted by each. Carrying out these recommendations will lead to a smoother implementation.

Critical Success Factors and Associated Risks	Potential Impact to a Successful Implementation	Specific Action Items (Mitigation Plan)	Target Completion Date	Owner Clinic, Vendor, Pito
Benefit Evaluation		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
Workflow		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
Business Policies		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
Requirements		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
Conversion		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
Communication		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
EMR Solution		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
Data Input Method		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
Written Project Plan in Place		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
Go-Live Ready		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
Clinical Leadership		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
SuperUsers – Physician(s)		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
SuperUsers – MOA(s)		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
Commitment/Dedication & Availability (Clinic & Practice)		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
Drivers for Change		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>
Group Dynamics		▪		C: <input type="checkbox"/> V: <input type="checkbox"/> P: <input type="checkbox"/>

**9. Supporting Document Checklist:** The following resources have been shared with you to assist with implementation planning.

Document		Comments
PITO ITSP Binder or PITO COP Binder	<input type="checkbox"/>	
Office Technology: Typical Practice Setup	<input type="checkbox"/>	
Office Technology: Hardware Considerations	<input type="checkbox"/>	
Office Technology: Additional IT Responsibilities	<input type="checkbox"/>	
Office Technology: Tablets	<input type="checkbox"/>	
Office Technology: Electronic Fax	<input type="checkbox"/>	
Preparing Your Practice: Moving from Paper Charts	<input type="checkbox"/>	
Business Continuity Copy (BCC)	<input type="checkbox"/>	
Vendor Selection Tool	<input type="checkbox"/>	
EMR Process Changes	<input type="checkbox"/>	

<a href="#"><i>Data Conversion Considerations Q &amp; A</i></a>	<input type="checkbox"/>	
<a href="#">Budget Tool</a>	<input type="checkbox"/>	
<a href="#">The PPN Primer</a>	<input type="checkbox"/>	
<a href="#">PITO Privacy Guide</a>	<input type="checkbox"/>	
<a href="#">PPN Technical Reference</a>	<input type="checkbox"/>	
<a href="#">EMR and PPN Implementation Checklist</a>	<input type="checkbox"/>	
<a href="#">EMR and PPN Support Quick Reference</a>	<input type="checkbox"/>	
<a href="#">EMR and PPN Support Responsibility Matrix</a>	<input type="checkbox"/>	
<a href="#">PPN Additional Requirement and Solution Summary</a>	<input type="checkbox"/>	

**10. Additional Comments:**