

Getting Started with HRM







Who Should Use This Guide?

This guide will walk you through the necessary steps to connect your Electronic Medical Record (EMR) to Health Report Manager (HRM). The information is intended for Ontario-based clinics that are beginning their HRM adoption process. This guide may be specifically helpful to Clinic Managers, IT Administrators, and Lead Physicians; any

contact that will be assisting the adoption of HRM within your organization.

About HRM

Health Report Manager (HRM) is a digital health solution that enables clinicians using an OntarioMDcertified EMR to securely receive patient reports electronically from participating hospitals and specialty clinics.

Traditionally, hospitals and specialty clinics have sent reports to primary care providers and specialists by producing a paper document and sending by mail, fax or courier, or holding it for pick-up by clinicians. HRM electronically delivers the following report types from the hospital or specialty clinic directly into a patient's record, within the clinician's EMR:

- Medical Record reports (e.g. Discharge Summary)
- Diagnostic Imaging (excluding image)
- eNotifications –a near real-time message to notify them when their patients are discharged from the Emergency Department or are admitted or discharged from inpatient units. *Note that not all sending facilities on HRM send eNotifications.*

The diagram below shows how HRM works:



• The health information system (HIS) sends a patient report to the Health Report Manager using HL7

• HRM converts the patient report into the EMR standard message format, encrypts and stores the report in an sFTP folder for secure pickup by the intended OntarioMD-certified EMR

• The clinician's EMR picks up the report, which is posted to the patient's record and the clinician's inbox for review and sign-off

For more information about HRM, please visit the OntarioMD website: https://www.ontariomd.ca/portal/server.pt/community/hospital_report_manager/

Lab reports are accessible through Ontario Laboratory Information System (OLIS); to subscribe, please speak to your OntarioMD Practice Advisor.



Connection Process





1.0 Prepare

In the preparation stage, your OntarioMD Practice Advisor will meet with the clinic to explain what is required to connect your clinic's EMR to HRM. The Practice Advisor is available to help complete the necessary documentation and answer any questions that the clinic may have regarding the various implementation activities and timelines.



1.1 HRM Kick Off Meeting with OntarioMD

Before enrolling in HRM the below requirements and details must be confirmed:

- **Specification 4.1A:** A spec 4.1A or higher EMR is required for connection to HRM. It is your EMR vendor's responsibility to update your practice's EMR to version 4.1A
- Vendor Information: EMR provider, Local or ASP configuration, version number
- Static IP address: A static external IP address from a commercial Internet Service Provider (ISP) is required for connection to HRM. HRM infrastructure employs a network firewall that will only allow known, trusted IP addresses to connect. If your practice is unsure about whether you have a static IP address or not, you should reach out directly to your internet service provider for assistance
- Basic Connectivity Testing: Your Practice Advisor will provide a tool to capture your IP address
- **Technical Contacts:** Your clinic can identify the project lead at your practice and/or EMR vendor contact, or if you have one, your third-party IT service provider who will be involved in the implementation of HRM
- End Users: The practice must determine which clinicians will enroll in HRM

During the preparation stage, your OntarioMD Practice Advisor will also tentatively schedule necessary on-site visits, as required, and gather any other additional preliminary information to enroll for HRM.

2.0 Enroll

In order to enroll in HRM, the clinic must complete the following documentation:

2.1 Complete Subscription & Technical Information Sharing Agreements

HRM Subscription Agreement

The HRM Subscription Agreement describes the terms, conditions and responsibilities of each practice and user subscribing to HRM. Each practice must sign an HRM Subscription Agreement; one agreement per practice (or as discussed with your OntarioMD Practice Advisor) is required.

The HRM Subscription Agreement provides details about the service being offered by OntarioMD, the obligations of your practice under the *Personal Health Information Protection Act (PHIPA)* as the recipient of reports through HRM and the associated service level agreement between OntarioMD and your practice.



The person who is required to sign the HRM Subscription Agreement is typically the Health Information Custodian ("HIC") at your practice. You OntarioMD Practice Advisor can assist you in determining who the HIC is at your practice, if required.

Technical Information Sharing Agreement

The **Technical Information Sharing Agreement (TISA)** identifies the contacts that will act as the project leads for HRM implementation. This agreement provides the OntarioMD HRM Team with the contact information for the designated individuals and acts as formal acknowledgement by your practice that the OntarioMD HRM Team is permitted to communicate with these individuals as required and/or requested by your practice.



The **HRM End User Agreement** must be completed for each clinician wishing to enroll in HRM. This agreement provides details about your access rights and obligations to HRM as an EMR user. A clinician will be required to sign and submit one HRM End User Agreement for each clinic location at which he or she practices or for the number of EMRs he or she may use.

Please provide the user's full first and last name, as registered with the College of Physicians of Ontario (CPSO) for physician and with the College of Nurses of Ontario (CNO) for nurse practitioners. HRM will deliver reports to your EMR based on your CPSO/CNO registered name.

Upon completion of enrollment, you can expect your practice to go-live on HRM within four to six weeks; individual timelines may vary.

3.0 Implement

A representative from the OntarioMD IT Deployment Team will confirm the HRM deployment schedule determined by the clinic during the kick-off meeting to ensure that all dates and timelines are accurate.



3.1 User Acceptance Testing (UAT) – Optional

The UAT phase is optional and, if requested, is intended to help guide you through some of the workflow changes that you may experience as a result of connection to HRM.

To complete User Acceptance Testing, please complete the UAT request form.



Below are the tasks that will need to be completed as part of User Acceptance Testing:

Task	Resources	Time Estimate
Entering UAT pre-load test physicians and patients	Primary Technical Contact	20 minutes
Setting up and testing a connection to the HRM test server	Primary Technical Contact	20 minutes
Performing UAT	Primary Technical Contact or EMR Admin or Lead Physician	45 minutes to 1 hour
Sign-Off	Lead Physician	5 minutes

During UAT, your clinic will receive information on industry best practices such as re-engineering business processes, migration from paper-based processes to electronic and use of an eConnectivity product to improve practice efficiencies.

Once you have gone through and completed all the test cases and are confident that everything is working as expected for your practice, you will confirm with OntarioMD that UAT is complete and you are ready to proceed with connection to the HRM production environment.



3.2 EMR Vendor Training

Your EMR vendor should also provide you and your staff with HRM Administration and HRM End User training. HRM Administration training has to be done early to be able to complete the required set-up and configuration tasks for HRM in your EMR. It is strongly recommended that HRM End User training take place as close to your HRM Go-Live as possible to help staff retain the information and reduce the time between training and use.

Ultimately, you decide how much training you want, when you want to conduct it and how involved you want your EMR vendor to be throughout the training. In smaller clinics with fewer staff, you may be able to train everyone at once. However, in larger clinics with lots of staff, and multiple locations, it may be easier and more cost effective to user the train-the-trainer approach. You will want to work closely with your EMR vendor to understand your options and negotiate a training plan that works best for your practice.

Your OntarioMD Practice Advisor can provide you with some guidance on training and help you identify any unique training needs your practice may have. HRM training from your EMR vendor should include these recommended topics as a starting point:



HRM Administration Training

- Enabling HRM (on your own or with the vendor?)
- Configuring your EMR to access the HRM server name/IP address
- Configuring your credentials and file decryption keys
- Configuring your report autopolling
- Report categorization

HRM End User Training

- Where do you find reports received through HRM?
- How do you view reports?
- How do you mark reports as reviewed?
- How do you mark reports as approved?
- Where are reports stored?
- Report matching errors (i.e. you received a report not meant for you, handling unmatched patient reports, handling unmatched clinician reports)
- Report categorization



3.3 Report Categorization & Workflow Review

Report Categorization

The ability to automatically categorize reports as they are received is one of the benefits of the HRM report delivery. Your EMR categorizes reports according to the rules that you define; if you are not aware of how to use this function before you go live with HRM, make sure this topic is covered in the HRM End User training you receive from your EMR vendor.

Factors to consider when setting up report categories at your practice:

- What are the typical patient encounter types you see at your practice?
- What are the potential categories that would better support users in their review of a patient chart in a more meaningful way?
- Determine how generic and/or specific you want your categories to be? *Broad report* categories will help reduce changes to categories later when connecting to other sending facilities
- Involve all users in your practice who review reports to ensure categories meet the needs of all areas and all users

Once you have considered the factors above, it is a good idea to create a list of all the report types that you currently receive to determine meaningful categories under which to group the reports.

It is strongly recommended that the categorization of these reports is set up before going live with HRM. Comprehensive lists of the reports being sent by all HRM sending facilities can be found on the OntarioMD website at: <u>www.ontariomd.com/ir/liveonhrm</u>

Please note that not all reports received through HRM will contain the exact same formatting as the paper versions from a sending facility. The inherent limitations of text-based electronic reports mean that logos, graphics, line borders or hand written text will not appear.



Workflow Review

The introduction of HRM at your practice will change the way clinicians and staff handle inbound reports from hospitals and independent health facilities (IHFs) and cut down the amount of work spent processing them. Understanding your current workflow for inbound report handling will help you identify where these changes may occur.

3.4 Connect to HRM

Enabling HRM on your EMR

Before your EMR can be connected, you will need to ensure that the HRM module in your EMR is enabled. Please contact your EMR vendor to confirm if the HRM functionality is turned on and, in the event that it is not, to assist your practice with turning it on.

Installing Required Security Keys

HRM report decryption keys are essential to the security of the personal health information contact in reports distributed through HRM. Decryption keys will be sent to the technical contact identified by your practice. Installation instructions will also be provided according to your agreement with your technical support and/or your EMR vendor.



3.5 OntarioMD Welcome Report

The OntarioMD deployment team will work with your EMR vendor and/or clinic to ensure that the EMR is configured correctly for the HRM application. Once all implementation activities are complete and your practice is ready to go-live, an OntarioMD Welcome Report will be sent via HRM to confirm successful receipt of a report. This report will be received into an unmatched patient folder within your EMR.

4.0 HRM Go-Live



4.1 Clinic Live on HRM

Once the receipt of a welcome report is confirmed, your clinic will be live on HRM!



5.1 Post Go-Live Review

During the Post Go-Live Review, your OntarioMD Practice Advisor will confirm that HRM is working as expected and determine if further assistance is required with workflow changes. The support processes will also be reviewed included how to "turn off paper" (or any other methods of receiving reports) from the hospital for each clinician at the practice.





5.2 Implement Workflow Changes

Now that you are live on HRM, you may receive reports through HRM as well as through the traditional methods.

During the first few weeks after Go-Live, you should:

- Confirm that the HRM application is functioning as you expected
- Confirm that all clinicians at your practice are receiving the correct reports through HRM
- Confirm that the reports are presenting the same data as the paper reports
- Ensure that in the event a report is not received through HRM, your practice will still be able to receive the report through the traditional methods

There will also be changes to how you approach your existing operational and support processes. Your first point of contact is OntarioMD **Service Desk** (<u>support@ontariomd.com</u> or 1-866-744-8668). The OntarioMD Service Desk will field all support requests and escalate to other departments for support, as required. These processes will be reviewed during your Post Go-Live Review.

Please refer to the **HRM Operations User Guide** for complete and detailed instructions on the HRM operational and support processes. Below is a quick reference table outlining the types of requests covered in the Guide:

Incidents	Service Requests
 Expected report not received Report cannot be opened/viewed Duplicate report(s) received Report sent cannot be consumed by EMR (error) 	 Enroll additional clinician(s) to HRM De-activate/remove clinician from HRM Network changes (e.g. firewall, IP address change, ports, etc.) Name and address changes Hardware changes (e.g. servers, routers, other devices) Software changes (e.g. change in EMR)