



# HEALTH REPORT MANAGER

## 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 helpful to Clinic Managers, IT Administrators, and Lead Physicians or any contact that will be assisting in the adoption of HRM within your organization.

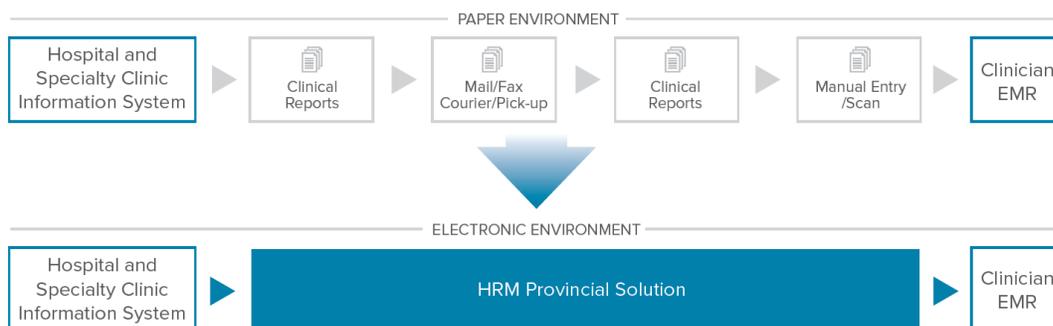
## About HRM

Health Report Manager (HRM) is a digital health solution that enables clinicians using an OntarioMD-certified EMR to securely receive patient reports electronically from participating hospitals and Independent Health Facilities (IHF's).

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 in-patient 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

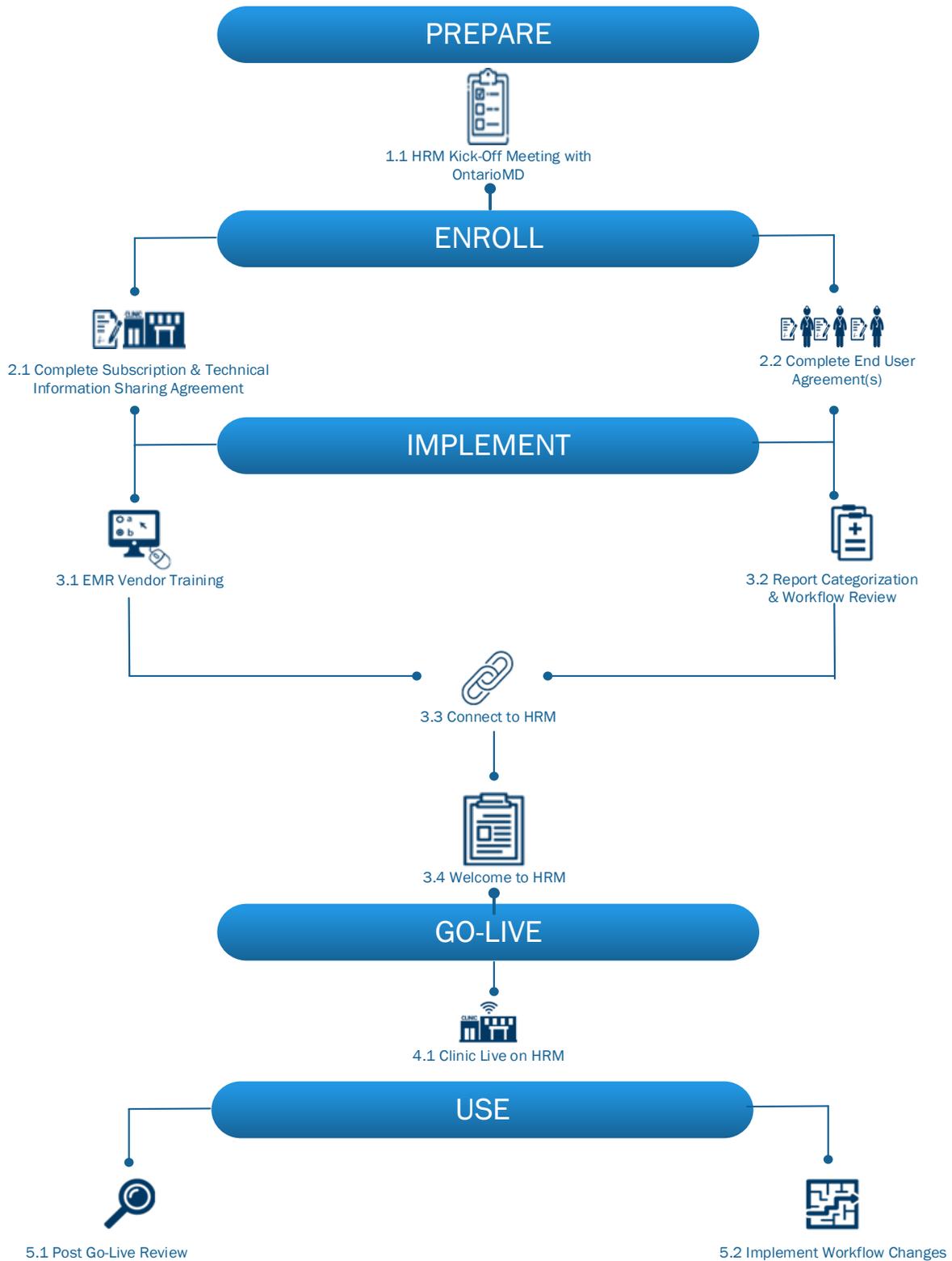
For more information about HRM, please visit the OntarioMD website:

[https://www.ontariomd.ca/portal/server.pt/community/hospital\\_report\\_manager/](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 requirements below 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.



## 2.2 Complete End User Agreement(s)

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 during the kick-off meeting to ensure that all dates and timelines are accurate.



## 3.1 EMR Vendor Training

HRM training may be offered as a manual or video(s) from your EMR vendor. You will need to contact your vendor to request those HRM material(s). Additionally, your OntarioMD Practice Advisor can provide you with some guidance and help you prepare for HRM at your practice. As a starting point, your Practice Advisor can ensure that you understand the following:

HRM Administration Training	HRM End User Training
<ul style="list-style-type: none"> <li>• Report categorization</li> </ul>	<ul style="list-style-type: none"> <li>• Where do you find reports received through HRM?</li> <li>• How do you view reports?</li> <li>• How do you mark reports as reviewed?</li> <li>• Where are reports stored?</li> <li>• Report matching errors (i.e. you received a report not meant for you, handling unmatched patient reports, handling unmatched clinician reports)</li> <li>• Report categorization</li> </ul>

Once you are live on HRM, your Practice Advisor can meet with you to assist with categorization.



### 3.2 Report Categorization & Workflow Review

#### Report Categorization

HRM delivers medical record and diagnostic imaging reports from participating hospitals and specialty clinics. Each sending facility determines which reports they will deliver through HRM.

When an HRM report is received in your EMR, it is automatically labelled with the patient’s name and is associated with their chart, if one exists. Some EMRs (such as OSCAR and Accuro) also add HRM report titles as the reports are received into the EMR, which are determined by the sending facility. A list of these report types can be found on the OntarioMD website at this [link](#). Other EMRs (such as PS Suite) require the user to define the HRM report titles upon delivery into the EMR.

Regardless of which EMR you use, it is important to consider how you wish to standardize your report labelling. This process is known as ‘report categorization’.

Standardizing the way, you label reports will allow you to utilize the same report labels regardless of whether they are delivered by fax or through HRM. This will in turn help you locate and query reports more easily. For example, if 3 sending facilities label *Colonoscopy* in 3 different ways, you would need to search for 3 different titles to pull a report on colonoscopies.

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

- 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. *For example: for an x-ray of the right hand, would you label this as "x-ray hand", or do you wish to be more specific and capture which hand? The level of specificity will impact the number of report types within your EMR and should be considered when determining categories.*
- Involve all users in your practice who review reports to ensure categories meet the needs of all areas and all users. This will allow you to standardize reports delivered by fax and those delivered directly into the EMR through HRM.

It is a good idea to review the list of report types that you currently utilize for reports received via fax. This will help determine meaningful categories under which to group the reports. Ultimately, you want to utilize the same report categories regardless of the method of report delivery to achieve consistency.

### **Autocategorization**

Autocategorization is the ability to affix your preferred category to a report type delivered through HRM. As previously mentioned, each sending facility or IHF's provides their own list of reports and each has a unique identifier tied to it. The autocategorization tool within the EMR maps the EMR category to that unique identifier. It is important to note that not all reports can be autocategorized. The level of specificity that can be achieved through autocategorization is dependent on the level of specificity of the reports delivered by a sending facility or IHF's.

For example, if a hospital delivers "Operative Reports" as the 'Report Type' and you receive a colonoscopy report, you cannot use autocategorization to capture anything more specific than 'Operative report'. In other words, if you tried to autocategorize the report as a 'Colonoscopy' all future operative reports from that hospital will be labelled "Colonoscopy". There are many types of operative reports: colonoscopy, endoscopy, cystoscopy, etc. and all of these reports would be labelled as Colonoscopy.

Please watch the HRM autocategorization video for more detail.

### **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 (IHF's), including cutting 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.

Please contact your OntarioMD Practice Advisor for more information.



## **3.3 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.



## **3.4 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!

## 5.0 Use



### 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 including 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** ([support@ontariomd.com](mailto:support@ontariomd.com) 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
<ul style="list-style-type: none"> <li>• <b>Expected report not received</b></li> <li>• <b>Report cannot be opened/viewed</b></li> <li>• <b>Duplicate report(s) received</b></li> <li>• <b>Report sent cannot be consumed by EMR (error)</b></li> </ul>	<ul style="list-style-type: none"> <li>• Enroll additional clinician(s) to HRM</li> <li>• De-activate/remove clinician from HRM</li> <li>• Network changes (e.g. firewall, IP address change, ports, etc.)</li> <li>• Name and address changes</li> <li>• Hardware changes (e.g. servers, routers, other devices)</li> <li>• Software changes (e.g. change in EMR)</li> </ul>