



MN-CMS Newsletter



The MN-CMS National Programme Team remains committed to its contribution to the improvement of quality and safety of patient care

Phase 2 of the MN-CMS EHR Implementation

The Coombe Hospital (TCH) and University of Limerick Hospital Group (ULHG) have progressed through all planned milestones to date overcoming some unexpected obstacles as they progress to their ultimate goals of going live with the MN-CMS EHR in 2025.

The Current State Review (CSR) occurred on the 13th and 14th May in ULHG and on 15th and 16th in TCH. These were multidisciplinary events including midwives, nurses, doctors, allied health professionals, (HSCPS), pharmacists, lab scientists, admin etc. The purpose of CSR was to visualise, hear and learn about the existing system workflows and processes in both sites to identify potential gaps and areas in need of extra attention for localisation.

The second milestone event, Future State Review (FSR), was held in TCH on 26th and 27th June and in ULHG on 2nd and 3rd July. These events were also multidisciplinary with a great turn out including midwives, nurses, allied health professionals, lab scientists, admin, doctors etc. The purpose of FSR was to demonstrate and where possible define Future State Workflows which will support best practice, describe points of workflow integration with other departments and roles and demonstrate workflow design that support value objectives and operational goals.

Future State Validation (FSV) took place in Oracle Cerner offices over three days starting 16th Sept. FSV demonstrated new build within MN-CMS EHR, workflows impacted by the project scope and the workflows that directly support value objectives. The Value Objective baselines are now being collected by both sites.

The next gateway will be the Testing gateway and work is underway in the testing phase of the project. The objective of testing the MN-CMS EHR is to ensure that the EHR delivered is complete, has been setup and configured correctly and that all major functional components and linkages are operational.

The MN-CMS EHR National Team, Oracle Cerner, TCH and ULHG project multidisciplinary teams in conjunction with 3rd parties are working together to complete the testing of the MN-CMS EHR. This has been supported by HSE Tech Data Comms Team with the implementation of Firewall Rules to enable TCH and ULHG access to MN-CMS EHR.

System testing has been completed, integration testing and the new train domain testing is in progress.

Training will take up a significant portion of the time in the run up to the Go-lives. Of utmost importance will be the identification of **Trainers** and **Superusers** who will be the lynch pin for the support of all staff at and post go-live and ultimately the successful adoption and use of the EHR



MN-CMS Newsletter



The MN-CMS National Programme Team remains committed to its contribution to the improvement of quality and safety of patient care

Business as Usual (BAU) and Optimisation

The MN-CMS workstream leads continue to work with all sites to make changes to the EHR in collaboration and with agreement of all sites to ensure a standardised system is available to all to ensure the support of patient care is maintained including stabilisation of the solution in Primary Care Centers

Maternity and Gynaecology Workstreams: BAU work continue to be very productive with: the investigation and correction of issues reported, review of and updating of existing documentation to support new national guidance / legislation, optimisation of existing documentation through the addition of new fields / response options, creation of new consults and iView sections to support national and local service extensions.

Ongoing work includes: Review /testing of new software relating to measured blood loss documentation, proof of concept for creation of new documentation to support community midwives postnatal discharge as well as documentation and the installation of new components to facilitate the graphing of vital signs on Summary Pages

NICU Workstream: On-going change requests and system changes are in progress or completed as agreed with all stakeholders - the addition of Premature Newborn Screening Tracking and Expressing Breast Milk sections have received positive user feedback The NICU workstream has been central to the development of the VON PowerForm in collaboration with the reporting workstream and clinical sites and will be deployed to the live environment shortly. Fabian Ventilator integration has been successfully completed in Rotunda. Project works are currently underway for Fabian integration within CUMH and the CareAware Cloud iBUS Upgrade. Ongoing Pathfinding work includes the adoption of the Oracle Cerner Hyperbilirubinemia Cloud Component based on the AAP 2022 Guideline for infants ≥ 35 weeks gestation to replace our current Hyperbilirubinemia Prediction Tool on Neonatal Workflow MPage. This is being evaluated in terms of development effort against the roadmap to determine when this work can be prioritised and timelines.

Theatre and SN Anaesthesia Workstreams: Continues to be a very active workstream developing and improving the theatre module and work has already progressed on the optimisation of SN Anaesthesia to support recovery workflows.

Laboratory / Order Comms: The Lab Workstream continues to develop and implement the busy BAU and optimisation changes to lab order catalogues and electronic results reporting across the live sites to support the ongoing changes, optimisations and new tests that form part of the diagnostic laboratory services provided by labs. Some recent optimisations include the introduction of new results to reflect new testing methods for testing of tumour markers in 2 sites, updates to order catalogues and result reporting for revision of respiratory virus testing for winter 2024 across sites, and standardisation and streamlining of Virology result reporting across the sites.



MN-CMS Newsletter



The MN-CMS National Programme Team remains committed to its contribution to the improvement of quality and safety of patient care

Business as Usual (BAU) and Optimisation

Reporting Workstream: A new PowerForm was created to capture VON data has been developed to capture the relevant data and is going to PROD this Wednesday. As always there are new elements required to capture data requiring significant report changes e.g. new values to capture specific C-Section info

- C-Section Pre Labour/no induction
- C-Section –In Labour/after Induction

Data quality remains paramount and recent feedback from the HPO notes the good data quality from MN-CMS EHR. CUMH and UHK will go live in the near future. Report development is in progress to capture pertinent information for the Nirsevimab Immunisation Programme.

Medication Workstream: The Medication Workstreams proactive approach and innovative development and use of the EHR has significantly contributed to the successful launch of the Nirsevimab immunisation program. This will benefit paediatric units across the country and ultimately the new Children’s Hospital. The team efforts focused on patient safety and workflow integration across clinical teams, by leveraging their extensive experience from previous implementations and the use of clinical decision support, they were able to design an optimal workflow and user experience.

Training Workstream: The MN-CMS team have completed multiple training courses during 2024 enabling them to excel in their roles and successfully bring MN-CMS to the next level (Code upgrade and RHO enabled). When time allowed the team engaged in “Lunch and Learn Sessions” to facilitate knowledge transfer and a deeper understanding of their respective work stream accountabilities.

In terms of training deliverables a full review of all training materials has commenced in order to ensure end users have a positive training and implementation experience, the system is being used in a standardised manner and ultimately the patient care that is delivered meets the needs of the service users.

Clinical Engineering Workstream: Sustainability and digital transformation continue in the area of BMDI, last Christmas saw the Implementation of the Fetalink Infrastructure & Software Upgrade Project – 141 Connectivity Engines, 10 Servers and 1 Application across 4 sites. With January 2024 came the successful implementation of the SLE6000 neonatal ventilator integration with the MN-CMS EHR in CUMH. BMDI work continued throughout the year for Phase 2 Sites TCH & ULHG. In September 2024 the Fabian Therapy Integration Project successfully went live in the Rotunda, this integration facilitates optimal clinical decisions for better, safer care. This Christmas sees the MN-CMS CareAware Cloud Migration Project in flight, an extensive Cloud Upgrade Project across the 4 Live Sites.

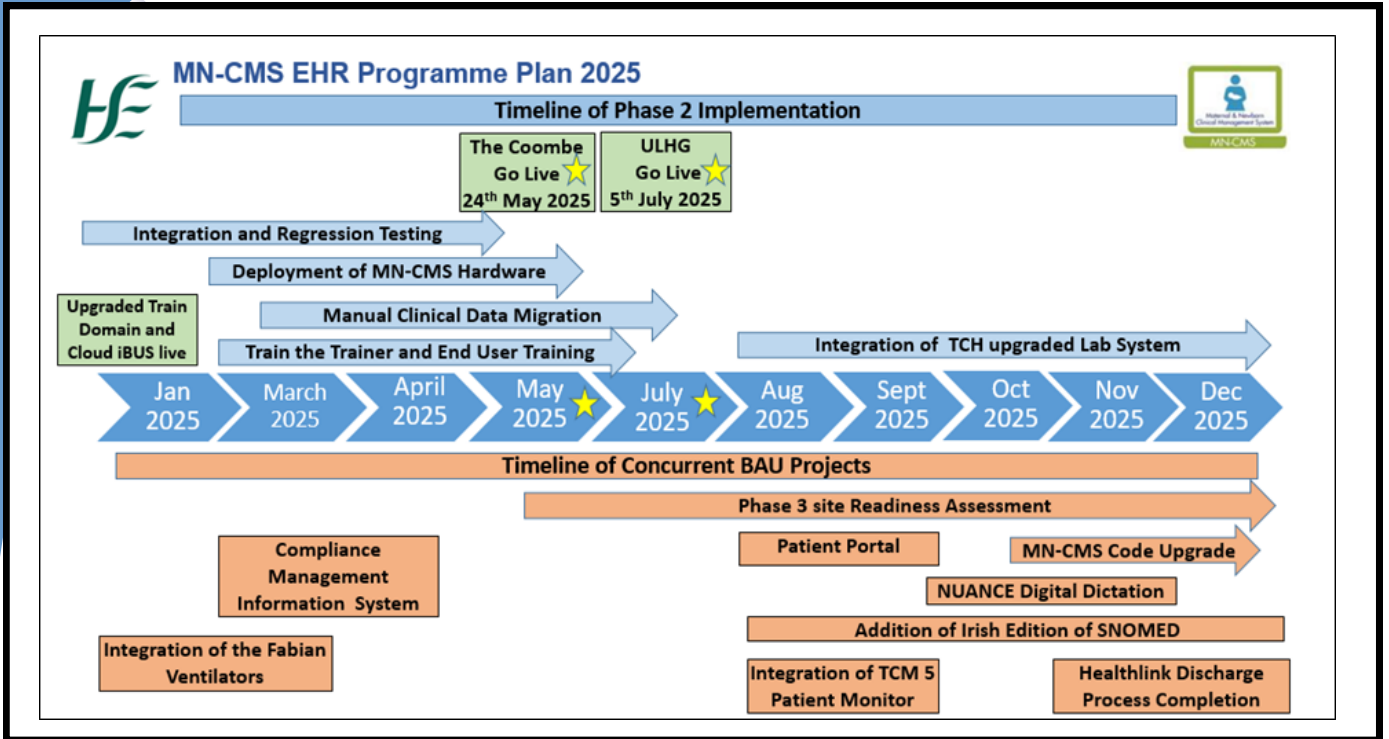
2025 will bring further advancements in BMDI e.g. Phase 2, Fabian, TCM5 to name but a few. Phase 2 also brings with it an extensive role out of new technology ensuring ease of access to digital care in line with the guiding principles of the HSE Digital Health Strategic Implementation Roadmap 2024 - 2030.



MN-CMS Newsletter



The MN-CMS National Programme Team EHR Programme Plan for 2025



The MN-CMS EHR National Team are grateful for all of your hard work over the past year planning, preparing, supporting and presenting at all Milestone & Gateway events. We had well attended sessions and robust and productive discussions with all teams and look forward to 2025 when TCH and ULHG will adopt the MN-CMS EHR to realise the benefits of the national integrated electronic health record.

A special thanks also to the staff at our CUMH, UHK, NMH and The Rotunda for all your engagement and assistance with the Phase 2 project to date including attendance at various workstreams, submitting optimisation ideas and contributing feedback on proposed changes as well as providing all around support for our new teams.

Wishing all our colleagues a very Happy Christmas and look forward to continued collaboration in 2025 and beyond.