



Transformative Integration: Next Generation Home Care with Bayshore's Epsilon™ Platform

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Better care for a better life

Session Objectives

1. Epsilon™ overview
2. Epsilon™ components
3. Epsilon™ Benefits
4. Procura mobile and mHealth
5. BC technology journey
6. What's next for Epsilon™



What is Epsilon™



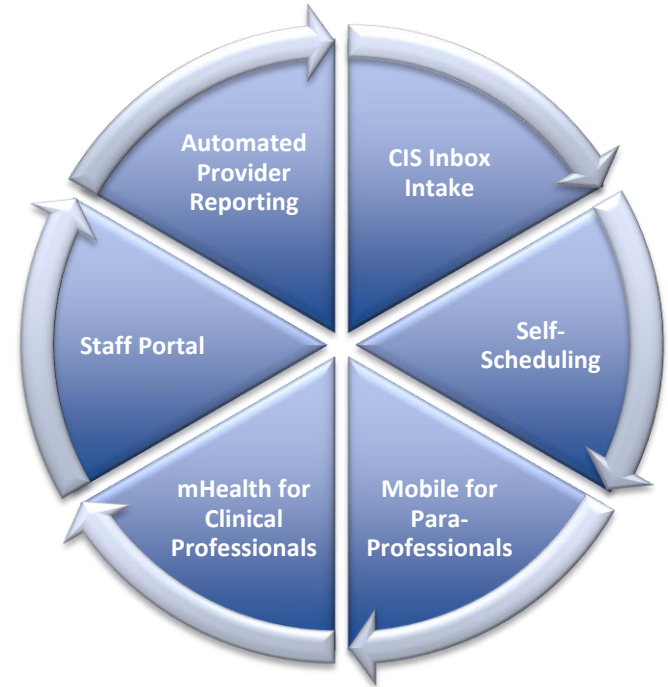
Bayshore's integrated **process** and **technology** platform for branch and field operations, that enables:

1. Collection of operational and clinical data at the point of care
2. Delivery of operational and clinical decision support at the point of care
3. Administrative efficiencies and improved communication

Epsilon™ Application Suite Components



Today's **Epsilon™** application suite consists of six (6) distinct components



Benefits for the Patient/Client

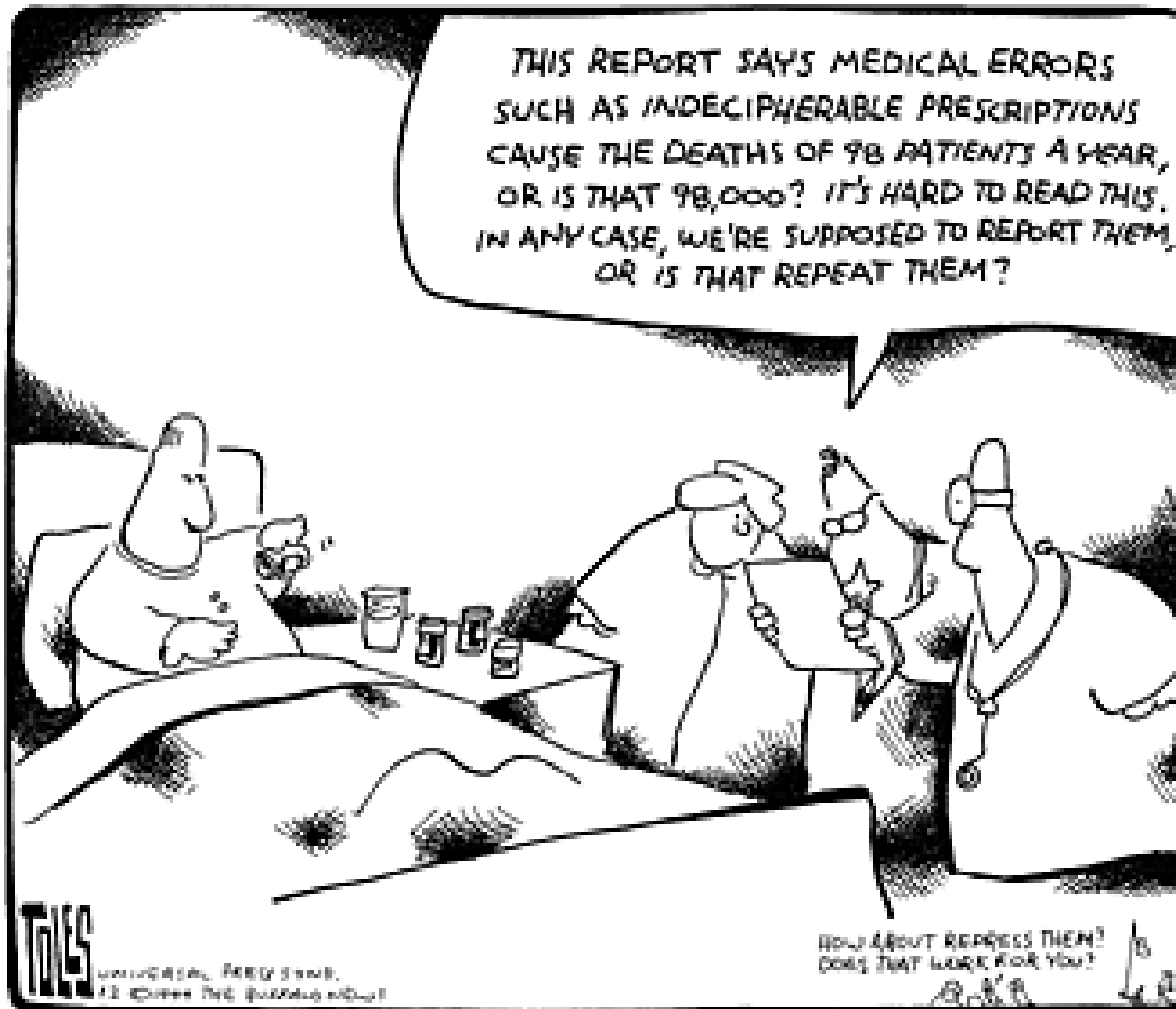
- Improved communication between internal care team members (Visiting / Shift Nursing and Unregulated Care Provider)
- Enhanced privacy and security of information through technology controls and protocols
- Improved turnaround on schedule and care plan changes for better care
- Eliminate the need for patient to repeat *their story*



Benefits for the Provider Clinical Staff

- **Better informed staff** - Most recent patient information and in home risk is available; can be reviewed *prior* to visit to ensure no unexpected situations
- **Real time access to schedules** ensures timeliness and more reliable service
- **Reduction of errors** from readability and gaps in documentation through use of electronic forms and workflows





Benefits for Health Authorities/funding partners



- Integrated electronic health record supporting point of care and outcome focused care
- Reduction of errors from readability and gaps in documentation through use of electronic forms and workflows
- Reduction in manual efforts to access missing information
- Improved Integration between provider and HA with CIS Inbox and APR

Benefits to all from Improved Integration

CIS (Client Intake System) Inbox

- Direct data movement into **Epsilon™**



APR (Automated Provider Report)

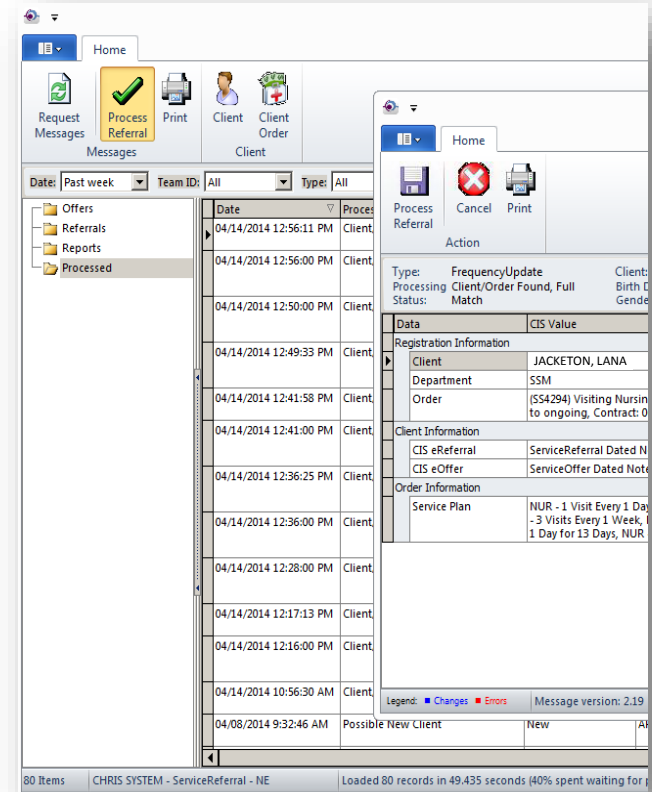
- Direct data movement **from point of care** directly to funder systems
- Validated through actual **FULL** deployment



CIS ... In Production and Successful!

CIS Inbox was implemented and brought into production at Bayshore branches in Ontario in 2013

- A prerequisite for Automated Provider Report (APR) deployment
- Reduction in data errors has been achieved
- Opportunities for continuous improvement
 - *i.e. format change for visit information*

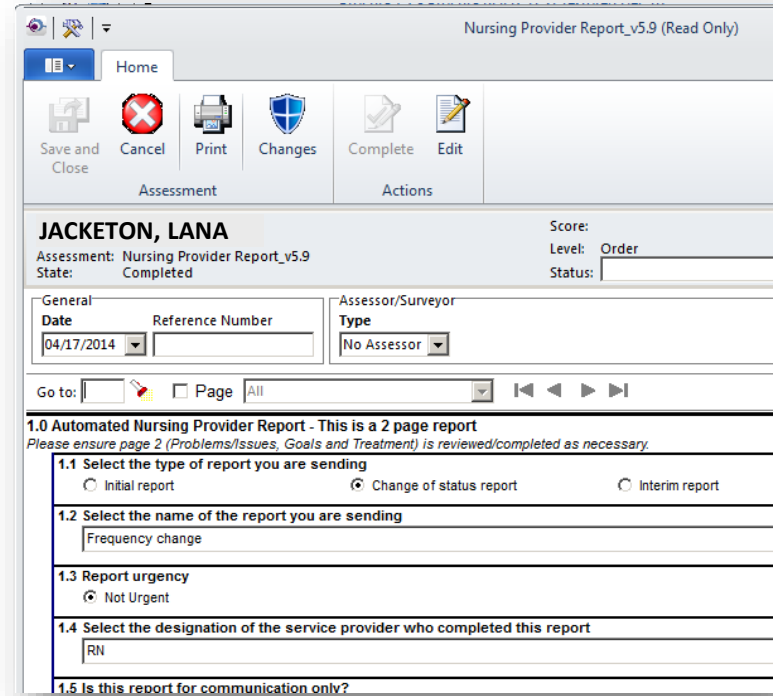


The screenshot displays the CIS Inbox application interface. The main window shows a list of messages with columns for Date, Team ID, and Type. A message is selected, and a detailed view is shown on the right. The detailed view includes a 'Process Referral' button, a 'Cancel' button, and a 'Print' button. Below these buttons, there is a 'Type' field with the value 'FrequencyUpdate' and a 'Client' field with the value 'Client/Order Found, Full'. The 'Status' field shows 'Match'. The 'Data' section contains a table with 'CIS Value' and 'Registration Information'.

| Data | CIS Value |
|--------------------------|---|
| Registration Information | |
| Client | JACKETON, LANA |
| Department | SSM |
| Order | (\$54294) Visiting Nursin to ongoing, Contract: 0 |
| Client Information | |
| CIS eReferral | ServiceReferral Dated N |
| CIS eOffer | ServiceOffer Dated Note |
| Order Information | |
| Service Plan | NUR - 1 Visit Every 1 Day - 3 Visits Every 1 Week, 1 Day for 13 Days, NUR |

Automated Provider Report (APR)

- Service/Nursing Provider Report now integral part of solution
- XML information received directly into Funder System (PARIS)
- Case Managers are able to respond, update and approve requests quickly and accurately
- Reduced administrative workflow means quicker response to client needs



JACKETON, LANA Score: _____
Assessment: Nursing Provider Report_v5.9 Level: Order
State: Completed Status: _____

General: Date: 04/17/2014 Reference Number: _____ Assessor/Surveyor Type: No Assessor

Go to: _____ Page: All

1.0 Automated Nursing Provider Report - This is a 2 page report
Please ensure page 2 (Problems/Issues, Goals and Treatment) is reviewed/completed as necessary.

1.1 Select the type of report you are sending
 Initial report Change of status report Interim report

1.2 Select the name of the report you are sending
Frequency change

1.3 Report urgency
 Not Urgent

1.4 Select the designation of the service provider who completed this report
RN

1.5 Is this report for communication only?

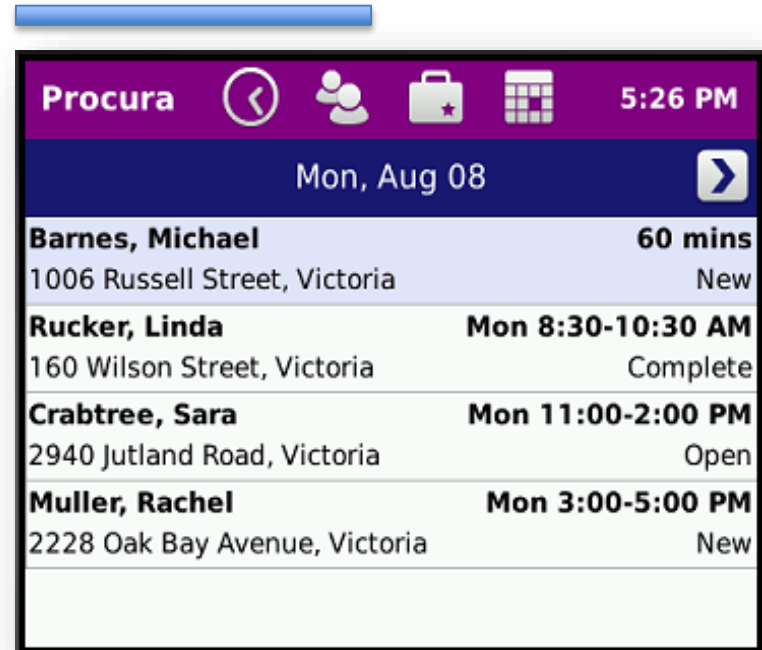
For the Unregulated Health Professional (UCP)

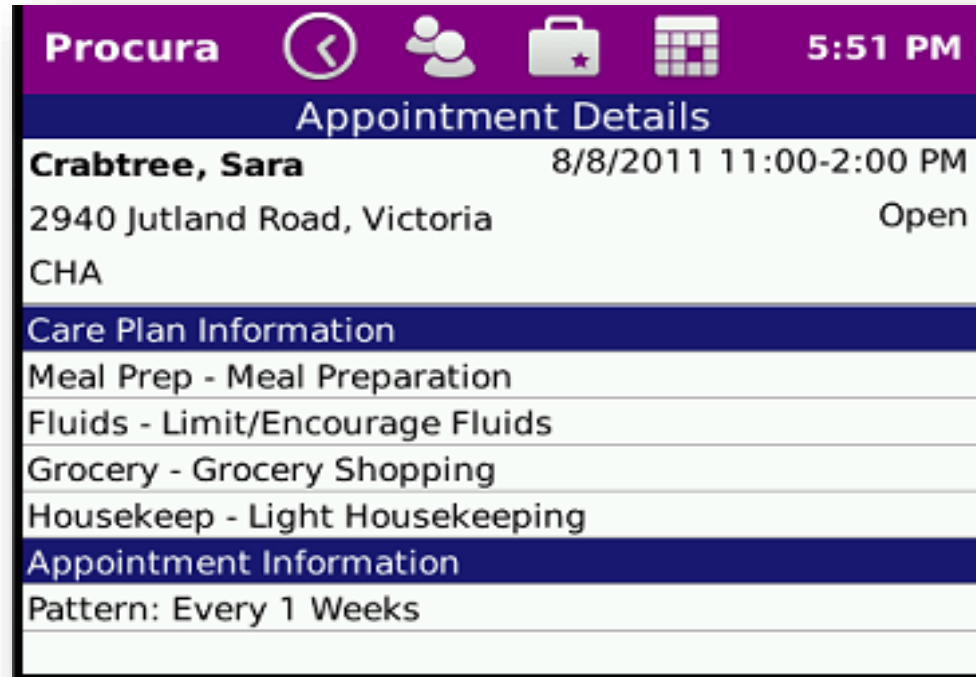
- Progress Notes
- Visit Activities
- Real-time Time & Attendance



Procura Mobile

When you log into Procura Mobile and select the  icon, a list of visits / appointments will be displayed in the Appointments list.





The screenshot displays the Procura mobile application interface. At the top, a purple header bar contains the word "Procura" on the left, followed by navigation icons: a back arrow, a person icon, a briefcase icon, and a calendar icon. The time "5:51 PM" is shown on the right. Below the header is a dark blue section titled "Appointment Details". The main content area shows the following information:

| | |
|-----------------------------|------------------------|
| Crabtree, Sara | 8/8/2011 11:00-2:00 PM |
| 2940 Jutland Road, Victoria | Open |
| CHA | |

Below the appointment details is a section titled "Care Plan Information" with a dark blue header. It lists several care plan items:

- Meal Prep - Meal Preparation
- Fluids - Limit/Encourage Fluids
- Grocery - Grocery Shopping
- Housekeep - Light Housekeeping

Below the care plan information is another section titled "Appointment Information" with a dark blue header. It shows:

- Pattern: Every 1 Weeks

Procura Clinical Day View

Care Pathways & Field Documentation

- Field Nurses
- Clinical Managers



Procura Care Pathways

Home Jones, Bridget x

Electronic Health Record - Demographics

JONES, BRIDGET Checked Out by **KATHERINE GRANT-BROWN** Changes: No

D.O.B.: August 30, 1929(84years old)
 Gender: Female
 Phone:
 Address:
 Diagnosis: (WOUND- DEC) WOUND- DECUBITIS

Electronic Health Record - Team

| Name | Phone | Type | Not |
|----------------|-----------------------------------|-------------------------|------|
| GREEN, SHAWNA | (H) 321-555-1234 (M) 321-555-1234 | CLIENT SUPERVISION | |
| Adult-Chronic, | (W) 321-555-1234 x6010 | LOCAL HOME CARE PROGRAM | |
| PAN, PETER | (W) 321-555-1234 | Medical | Spe |
| WAYNE, BRUCE | (W) 321-555-1234 | Medical | Spe |
| KENT, CLARK | (W) 321-555-1234 | Medical | Spe |
| Jones, Frank | | POA - Personal | Rela |

Electronic Health Record - Charting - Adult Care Pathway (age 19-64 yrs)

| Description | Type | Date | User | Status | Details |
|--------------------------------|-----------|------------|--------|-----------|----------------------------------|
| Wound Flow Sheet_v3.7 | Flow E... | 07/18/2012 | sgreen | Completed | |
| Visiting Nursing Entry (Adult) | Visit | 07/18/2012 | sgreen | Complete | Outcomes: 0 of 2 (0%), Intervent |
| Wound Flow Sheet_v3.7 | Flow E... | 07/16/2012 | svince | Completed | |

Procura Care Pathways

Home

Jones, Bridget Score: Level: Client
Assessment: Wound Flow Sheet_v3.7 Status:
State: Completed

| | |
|-------------------------------------|----------------------------------|
| General | Assessor/Surveyor |
| Date Reference Number | Type |
| 07/25/2012 <input type="text"/> | No Assessor <input type="text"/> |

Go to: Page All << < > >>

Wound Flow Sheet

Which wound flow documentation are you completing today?

Initial visit flow Subsequent visit flow

Is this visit for wound care being provided in the expected treatment location as indicated on the initial assessment (home, clinic, work etc)?

Yes No

Treatment Goal:

Healing Maintenance

Please document current treatment plan for this wound:

n/s, proshield, gauze sponge, mefx

Electronic Field Documentation



- The use of laptops by all clinical staff allows for completion and submission of forms (Supply Requisitions, SPR etc.) – *no more paper charts*
- Electronic signature and time stamping
- Closer collaboration of form development and testing

It's the journey, not the destination.

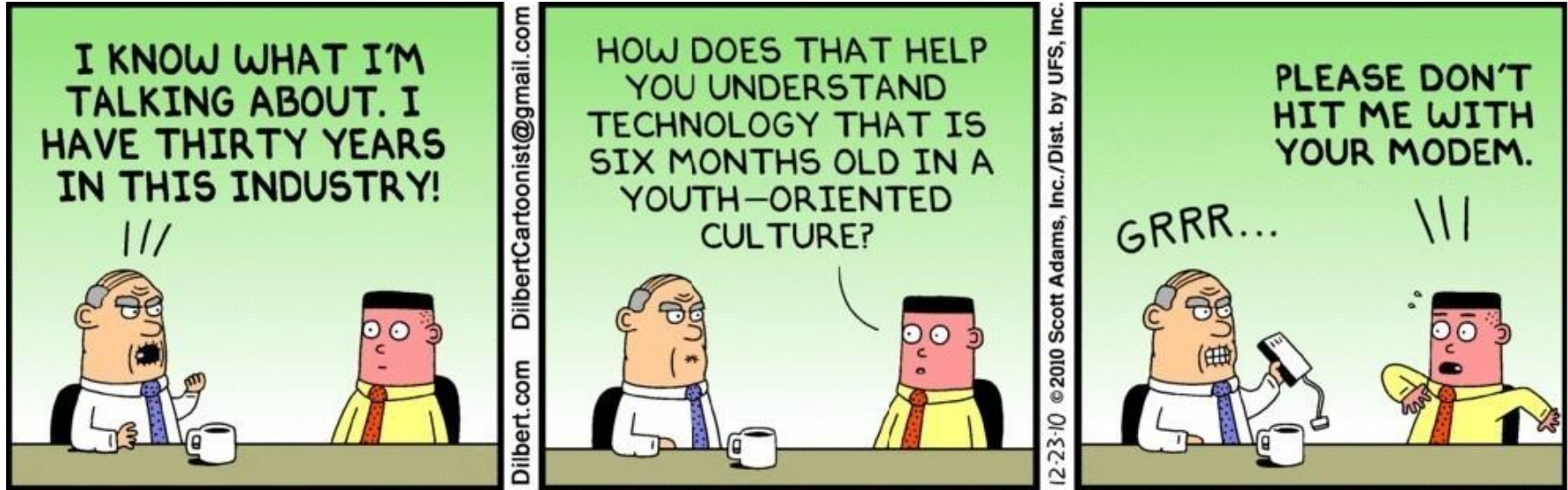


The journey can be rough

- Started in BC in September 2012
 - Site and people preparedness
 - Change management & Education
 - Deployment
 - Normalizing
- Approximately 1 year from planning to deployment
- Maintenance of changes is key



Change can be hard



Bayshore Epsilon™ Deployment Progress



| North Simcoe Muskoka | Champlain | HNNB | Erie St.Clair | South East | North East | MH / Central / TO Central | WW | NW | Burnaby (Home Support) | Edmonton | Calgary | Burnaby Pediatrics |
|----------------------|------------|------------|---------------|------------|------------|---------------------------|-----------|-----------|------------------------|-----------|----------|--------------------|
| 128 Nurses | 318 Nurses | 135 Nurses | 167 Nurses | 78 Nurses | 164 Nurses | 164 Nurses | 77 Nurses | 33 Nurses | 12 Nurses | 10 Nurses | 9 Nurses | 336 Nurses |
| 90 PSWs | 535 PSWs | 523 PSWs | 337 PSWs | 171 PSWs | 181 PSWs | 296 PSWs | 248 PSWs | 127 PSWs | 855 CHWs | 246 HCAs | 268 HCAs | 27 CRWs |
| 22 CSCs | 35 CSCs | 27 CSCs | 31 CSCs | 21 CSCs | 26 CSCs | | | | 52 CSCs | 14 CSCs | 12 CSCs | 4 CSCs |

It's worth it when you get there!

- Normalized by fall 2013
- Significant efficiencies
 - Reduced scheduling time by >25%
 - Reduced wasted Clinical time by 15%
- Improved employee satisfaction
- Technology is the new normal



What's next for Epsilon™ in BC and AB?

CIS (Client Intake System) Inbox

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APR (Automated Provider Report)



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Questions

