



RESOURCE AND PATIENT MANAGEMENT SYSTEM

EHR PHN Informatics

March 19-23, 2012

Office of Information Technology (OIT)
Division of Information Resource Management
Albuquerque, New Mexico

Indian Health Service Clinical Support Center (CSC)
(Accredited Sponsor)

Aberdeen Area Office, Albuquerque Area Office, Bemidji Area Office,
Billings Area Office, California Area Office, Nashville Area Office, Navajo
Area Office, Oklahoma City Area Office, and Phoenix Area Office

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1.0 Introduction

Effective public health practice requires timely, accurate, and authoritative information from a wide variety of sources. Not surprisingly, public health professionals within the Indian Health/Tribal/Urban Healthcare facilities have been among the earliest adopters of computer systems and other information technologies. Nevertheless, we need to utilize a more systematic and informed approach to the application of information science and technology in order to take full advantage of its potential to enhance and facilitate public health activities. This approach is embodied in the principles and practices of a discipline called *public health informatics*. Public Health Informatics is defined as the *systematic application of information and computer science and technology to public health practice, research, and learning*. It requires the application of knowledge from numerous disciplines, particularly information science, computer science, management, organizational theory, psychology, communications, political science, and law. Its practice must also incorporate knowledge from the other fields that contribute to public health such as epidemiology, microbiology, toxicology, and statistics (*Journal of Public Health Management and Practice, November 2000*).

Nursing informatics (NI) is a specialty that integrates nursing science, computer science and information science to manage and communicate data, information, knowledge and wisdom in nursing practice. NI supports patients, nurses and other providers in their decision-making in all roles and settings. This support is accomplished through the use of information technology and information structures, which organize data, information, and knowledge for processing by computers (*HIMSS, 2009*).

Prerequisites

Indian Health Care System Public Health Nurses (PHNs) and Clinical Application Coordinators (CACs) directly involved with the configuration, maintenance, and utilization of the RPMS EHR within the public health nursing setting.

Friday's session has a prerequisite class - *iCare Nuts and Bolts*

Audience: DPHNs, PHN Program Managers, PHN Super Users, PHN Field Nurses

To take the iCare prerequisite, go to:

<http://www.ihs.gov/RPMS/index.cfm?module=Training&option=WebEx>

Accreditation

The Indian Health Service Clinical Support Center is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

This activity is designated ___ contact hours for nurses.

Accreditation applies solely to this educational activity and does not imply approval or endorsement of any commercial product, services or processes by the CSC, IHS, the federal government, or the accrediting bodies.

Guidelines for Receiving Continuing Education Credit

To obtain a certificate of continuing education, you must register for the course on the OIT website and complete an online evaluation. Survey Monkey will be used to evaluate presenters and the overall conference. The Survey Monkey link will be provided at end of educational activity. When you have completed the evaluation, you will be able to print a continuing nursing education certificate.

Please track your daily Contact Hours using the CE Tracking Form provided to you by the facilitator onsite. You will need the total hours earned from this form to enter into Survey Monkey. Your feedback is valuable in providing future PHN informatics courses.

2.0 Course Learning Objectives

- Recognize the complexity and importance of precise information technology configuration, and it's relationship to PHN documentation process
- Express PHN information technology requirements in precise terms of EHR to appropriate parties
- Adhere to a common standard for PHN Clinical definitions
- Customize electronic health record configuration to meet PHN needs through the utilization of (a) New person file (b) Provider file (c) User class (d) Person class (e) Ordering keys (f) Electronic signatures and (g) Clinical application keys
- Explain why the use of standardized Note structure for public health nursing (a) facilitates provider communication (b) promotes quality patient care and safety (c) meets professional and legal standards
- Recognize essential parameters which define public health nursing, and explain why standardization smoothes workflow and promotes patient safety
- Apply knowledge to allow for standardized customization of pick lists which reflect PHN documentation processes, correct billing codes, and enhance workflow.
- Elaborate on the importance of adopting a standardized process for coding public health nursing encounters which align with valid billing practices
- Execute steps to establish an electronic signature and demonstrate RPMS shortcut keys to navigate quickly between menu functionality
- Elaborate on how electronic retrieval of accurately recorded data can result in improvements of workflow, patient care, patient safety, and employee retention.
- Apply tools of electronic health information systems in the analysis nursing workload toward the improvement of resource allocation and workloads.
- Apply tools of electronic health information systems in the analysis of population trends toward the improvement of patient care.
- Apply the concept of surveillance of trends using electronic health information tools which focus on quality of patient care.
- Apply the concept of ad hoc reporting using electronic health information tools in support of special or unique quality of care issues and exploration of population trends.
- Advocate for implementation of an electronic system which can capture non-direct patient care public health activities
- Articulate how electronic health systems can focus public health nursing's use of performance measures to improve patient care

- Articulate the synergies between local electronic data capture and global data repositories from which overall performance measures can be analyzed. Assimilate this understanding and advocate for accurate local data capture.
- Assimilate understanding of the technological concepts involving global electronic data repositories and advocate for accurate local data capture.
- Independently and comprehensively elaborate on PHN documentation best practices
- Demonstrate comprehensive understanding of PHN documentation best practices
- Deepen comprehensive understanding of PHN documentation best practices and think through nuanced case scenarios
- Recognize how use of electronic consults and notifications promote patient tracking technologies and foster interdisciplinary care
- Articulate how a well child program can be enhanced with the use of an evidence based measurement tool such as the ASQ
- Recognize the importance of an electronic toolkit in meeting the Breastfeeding component of the Baby Friendly Initiative. The initiative will use quality improvement processes to improve breastfeeding rates through new maternity care and infant feeding practices.
- Differentiate between Laboratory vs. Nursing/Text EHR Quick Orders.
- Implement PHN standardized electronic Note structures for public health nursing.
- Recognize the impact Health Information Technology and informatics has on improving the delivery of health care services and patient care.
- Explore the principles of population management through electronic case management tools.
- Independently access guidelines to implement PHN best practices for optimizing patient care in utilizing available health information technologies

3.0 EHR PHN Area Teams Facilitators/Instructors:

*Asterisks indicate facilitators (assist on site for logistical support): did not contribute to instructional content

Office of Information Technology Albuquerque

- David Taylor MHS, RPh, PA-C, RN, IHS OIT EHR Training and Deployment Manager
- Phil Taylor, BA, RN, Clinical Consultant, Medsphere Corporation (Contractor)
- *Jen Appel Downs, EHR Analyst and ePrescribing Co-Project Manager, Data Networks Corporation (Contractor)
- CAPT Theresa Tsosie-Robledo, MS, RN, BC, OIT USET EHR Nurse Consultant

Aberdeen Area

- *CAPT Leslye Rauth, MPH, RD, CDE, Aberdeen Area Clinical Application Coordinator
- Dayle Knutson BSN, RN, Aberdeen Area Public Health Nurse Consultant

Albuquerque Area

- *CDR Wil Darwin, PharmD, Albuquerque Area Clinical Application Coordinator and Pharmacy Consultant
- Neva Kayaani, BSN, RN, Albuquerque Area Public Health Nurse Consultant
- CAPT Tina Tah, BSN, RN, MBA Acting Senior Consultant Public Health Nursing

Bemidji Area

- *Teresa Chasteen, RHIT, Bemidji Area Clinical Application Coordinator
- *CAPT Amy Buckanaga, MSN, RN Acting Area Nurse Executive

Billings Area

- *Erik Chosa, RPh, Billings Area Clinical Applications Coordinator and Pharmacy Consultant
- *CAPT James Sabatinos, MSN, APRN-BC Billings Area Nurse Consultant

California Area

- *Steven Viramontes, Area Clinical Applications Coordinator
- *Susan Ducore, MSN RN, Area Nurse Consultant

Nashville Area

- *CDR Robin Bartlett, PharmD, Nashville Area Clinical Application Coordinator and Pharmacy Consultant
- *Max Boykin, MSN, Nashville Area Chief Nursing Officer
- CAPT Deborah Burkybile, MSN, RN, CPC, OIT USET EHR Nurse Consultant

Navajo Area

- *LCDR Andrea Scott, MBA, BS, Navajo Area Clinical Applications and MU Coordinator
- *LCDR Loretta Haven, BSN, RN, Public Health Nurse, Tsehootsooi Medical Center
- *LCDR Leah Earl-Begay, BSN, RN, Public Health Nurse, Tsehootsooi Medical Center

Oklahoma Area

- *CDR Amy Rubin, PharmD, Oklahoma City Area Clinical Applications Coordinator and Meaningful Use Consultant
- *Bonnie Kraft, Acting DPH, Clinton Service Unit

Phoenix Area

- CAPT Elvira Mosely, MSHS, BSN, RN, Phoenix Area Clinical Application Coordinator
- *Carol Dahozy, MSN, Phoenix Area Nurse Consultant
- Alena George
- Pamela Michaelson-Gambrell, RN, BSN, MSN
- *Mollie Ayala, MHI, IHS OIT USET EHR Training & Deployment Coordinator and BCMA Co-Project Manager

Instructors

- David Taylor
- Phil Taylor
- Dayle Knutson
- Katie Pratt
- Deborah Burkybile
- Toni Hackney
- Pamela Michaelson-Gambrell
- Mike Gomez

- Pat Ramsey
- Tina Tah
- Alena George
- Neva Kayaani
- William Flood
- Cecilia Butler
- Janna Morris
- Susan Richards
- Elvira Mosely
- Joanna Kelsey
- Theresa Tsosie-Robledo

4.0 Detailed Agenda and Learning Objectives

All times are Mountain (Daylight) Time

Time	Monday Audience: PHN Directors, PHN Program Managers, PHN Super Users Warm Invitation to Medical Record Coders, Billing, CACs, Site Managers
8:00-8:30	Local Facilitators <ul style="list-style-type: none"> Local Welcome, housekeeping, & Introductions. Review local setup and protocol, CEU signup, participants get logged in.
8:30-9:00	Tina Tah and Theresa Tsosie-Robledo <ul style="list-style-type: none"> All Sites WebEx Welcome and Introductions Tab 1. Review course to identify needs and expectations of course. Review the agenda for the week. Summarize Meaningful use and HITECH as it applies to Public Health Nursing.
9:00-9:45	Phil Taylor Electronic Health Record Customization and Workflow Tab 2. Overview. At the end of this session, participants should be able to: <ul style="list-style-type: none"> Recognize the complexity and importance of precise information technology configuration, and its relationship to PHN documentation process. Express PHN information technology requirements in precise terms of EHR to appropriate parties. Content: <ul style="list-style-type: none"> Provide an overview of Electronic Health Record data storage structures. Identify data structures as reflected through a GUI interface. Differentiate roles and responsibilities of EHR team at facility and user levels; Clinical Application Coordinator, Site Manager, Nurse Informaticist, PHN EHR Super User, PHN EHR User.
9:45-10:00	Break
10:00-11:30	Phil Taylor Electronic Health Record Customization and Workflow Tab 3. Concepts of a 'Clinic' in Public Health Nursing. At the end of this session, participants should be able to: <ul style="list-style-type: none"> Adhere to a common standard for PHN Clinical definitions. Content: <ul style="list-style-type: none"> List and elaborate on the concept of different Clinics commonly used by PHN. Distinguish between location and facilities, service categories and clinic codes. Demonstrate the implementation of PHN Clinical concepts in EHR. Work session: collaboratively plan and implement a common standard for Clinical definitions used by PHN.
11:30-1:00	Lunch

Time	Monday Audience: PHN Directors, PHN Program Managers, PHN Super Users Warm Invitation to Medical Record Coders, Billing, CACs, Site Managers
1:00- 1:45	<p>David Taylor and Phil Taylor Electronic Health Record Customization and Workflow Tab 4. Unique Attributes of a PHN User.</p> <p>At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Customize electronic health record configuration to meet PHN needs through the utilization of (a) New person file (b) Provider file (c) User class (d) Person class (e) Ordering keys (f) Electronic signatures and (g) Clinical application keys. <p>Content:</p> <ul style="list-style-type: none"> • Provide information on EHR security process and demonstrate correct definition of unique public health nursing configuration into structured data fields • Define the unique role of public health nurses and relate this distinction to electronic configuration of order entry and professional licensure information. • Empower individual users to further customize their electronic health record preferences and options. <p>Work session: collaboratively plan and implement a common definition of a PHN user in terms of electronic health record user set up options.</p>
1:45-2:30	<p>Phil Taylor Electronic Health Record Customization and Workflow Tab 5. PHN electronic, structured 'Notes' documentation.</p> <p>At the end of this session participants should be able to:</p> <ul style="list-style-type: none"> • Explain why the use of standardized Note structure for public health nursing (a) facilitates provider communication (b) promotes quality patient care and safety (c) meets professional and legal standards. <p>Content:</p> <ul style="list-style-type: none"> • Describe aspects of accomplished documentation specific to PHNs. • Demonstrate retrieval of standardized electronic Note templates from a public repository. <p>Work session: collaboratively plan and configure a common scheme for standardized Note documentation throughout public health nursing.</p>
2:30-2:45	Break

Time	<p align="center">Monday</p> <p>Audience: PHN Directors, PHN Program Managers, PHN Super Users Warm Invitation to Medical Record Coders, Billing, CACs, Site Managers</p>
2:45-3:30	<p>David Taylor and Phil Taylor Electronic Health Record Customization and Workflow Tab 6 Parameters for PHNs</p> <p>At the end of this sessions participants should be able to:</p> <ul style="list-style-type: none"> Recognize essential parameters which define public health nursing, and explain why standardization smoothes workflow and promotes patient safety. <p>Content:</p> <ul style="list-style-type: none"> Identify configuration and parameter settings that allow alignment of public health nurse clinical work flow processes with electronic health record structures. Define parameter configuration to specific levels to meet the needs of public health nursing within the framework of a comprehensive inter-disciplinary electronic system; note unique aspects of clinical visits such as vital signs and activity times. Examine the importance of adopting a standardized process for setting electronic parameters specific to public health nursing’s work processes. <p>Work session: collaboratively plan and implement a common definition of a PHN user in terms of electronic health record parameter options.</p>
3:30-4:30	<p>David Taylor and Phil Taylor Electronic Health Record Customization and Workflow Tab 7. Frequently used ICD, CPT, and patient education documentation ‘Pick Lists’.</p> <p>At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> Apply knowledge to allow for standardized customization of pick lists which reflect PHN documentation processes, correct billing codes, and enhance workflow. <p>Content:</p> <ul style="list-style-type: none"> Identify current list of ICD, CPT and PE codes frequently utilized by PHNs. Discuss impacts of PHN charting as it relates to both the Billing and reporting. Demonstrate the creation, import and export of best practice pick lists for the purpose of standardization. <p>Work session: collaboratively plan and implement a customized pick list specific to public health nursing.</p>
4:30	<p>Dismiss for the day</p>

Time	Tuesday Audience: PHN Directors, PHN Program Managers, PHN Super Users Warm Invitation to Medical Record Coders, Billing
8:30-9:00	Review of Previous Day's Training
9:00-10:00	<p>Dayle Knutson and Kayte Pratt Explore Relationship between Billing and PHN electronic coding practices Tab 8. At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Elaborate on the importance of adopting a standardized process for coding public health nursing encounters which align with valid billing practices. <p>Content:</p> <ul style="list-style-type: none"> • Differentiate ICD Codes utilized by PHNs that reflect the human condition versus a diagnosis. • Elaborate on how a location of encounter impacts billing. • Discuss how PHN coding of ICD and CPT impacts billing. <p>Work session: collaboratively develop recommended standard ICD and CPT codes for public health nursing functions.</p>
10:00-10:15	Break
10:15-11:00	<p>Deborah Burkybile Establishing an Electronic Signature and RPMS Navigation Tools Tab 9. A Hands on orientation. At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Execute steps to establish an electronic signature and demonstrate RPMS shortcut keys to navigate quickly between menu functionality. <p>Content:</p> <ul style="list-style-type: none"> • Navigate within RPMS and identify menu functions. • Create an electronic signature. • Identify troubleshooting resources. • Know how to request program enhancements. • Know how to request Menus for PHNs.
11:00-11:30	<p>Toni Hackney, Kathy Ray, and Dayle Knutson Electronic management reporting Tab 10. Overview. At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Elaborate on how electronic retrieval of accurately recorded data can result in improvements of workflow, patient care, patient safety, and employee retention. <p>Content:</p> <ul style="list-style-type: none"> • Examine management's need for data which pertains to resource allocation, quality assurance, and performance. • Discuss the importance of data analysis in support of management decisions.
11:30-1:00	Lunch

Time	Tuesday Audience: PHN Directors, PHN Program Managers, PHN Super Users Warm Invitation to Medical Record Coders, Billing
1:00- 1:45	<p>Toni Hackney, Kathy Ray, and Dayle Knutson Electronic management reporting. Resource Allocation and Workload Analysis Tab 11.</p> <p>At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Apply tools of electronic health information systems in the analysis nursing workload toward the improvement of resource allocation and workloads. <p>Content:</p> <ul style="list-style-type: none"> • Discuss how use of electronic data supports evidence based management decisions in resource allocation. • Demonstrate producing and analyzing a resource allocation report.
1:45-2:30	<p>Toni Hackney, Kathy Ray, and Dayle Knutson Electronic management reporting. Patient Population Trends Tab 12.</p> <p>At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Apply tools of electronic health information systems in the analysis of population trends toward the improvement of patient care. <p>Content:</p> <ul style="list-style-type: none"> • Discuss how use of electronic data supports evidence based management decisions for understanding population trends and improving patient care. • Demonstrate producing and analyzing a trend report.
2:30-2:45	Break
2:45-3:30	<p>Toni Hackney, Kathy Ray, and Dayle Knutson Electronic management reporting. Quality Assurance Tab 13.</p> <p>At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Apply the concept of surveillance of trends using electronic health information tools which focus on quality of patient care. <p>Content:</p> <ul style="list-style-type: none"> • Discuss how use of electronic data supports evidence based management decisions for improving patient care. • Demonstrate producing and analyzing various quality assurance reports.
3:30-4:30	<p>Toni Hackney, Kathy Ray, and Dayle Knutson Electronic management reporting. Ad hoc reporting Tab 14.</p> <p>At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Apply the concept of ad hoc reporting using electronic health information tools in support of special or unique quality of care issues and exploration of population trends. <p>Content:</p> <ul style="list-style-type: none"> • Compare and contrast surveillance and ad hoc reporting. • Discuss the role of ad hoc reporting in gathering evidence in support of unique PHN population concerns. • Demonstrate producing and analyzing various ad hoc reports which address PHN case scenarios.

Time	Tuesday Audience: PHN Directors, PHN Program Managers, PHN Super Users Warm Invitation to Medical Record Coders, Billing
4:30	Dismiss for the day

Time	Wednesday Audience: PHN Directors, PHN Program Managers, PHN Super Users Warm Invitation to Medical Record Coders, Billing
8:30-9:00	Review of Previous Days Training
9:00-9:30	<p>Pam Michaelson-Gambrell Capturing non-direct Public Health Activity Data – i.e. planning, community events Tab 15. At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Advocate for implementation of an electronic system which can capture non-direct patient care public health activities. <p>Content</p> <ul style="list-style-type: none"> • Discuss nature of public health work and the role of non-direct care activities. • Reinforce management need for understanding aspects of non-direct care and why typical electronic medical record systems do not accommodate this unique public health workload. • Demonstrate how an electronic tool can capture, report, and help management analyze non direct care activities.
9:30-10:00	<p>Dayle Knutson Practical Applications of Performance Measures applied to Public Health Nursing Tab 16. At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Articulate how electronic health systems can focus public health nursing's use of performance measures to improve patient care. <p>Content:</p> <ul style="list-style-type: none"> • Identify distinct performance measures (GPRA) which directly relate to public health nursing. • Expand on foundation of how accurate data recording translates into accurate reporting. • Discuss the importance of understanding precise definitions of how performance measures are calculated. • Demonstrate how an electronic tool such as CRS can help management analyze public health nursing's impact on overall facility performance measures.
10:00-10:15	Break
10:15-11:30	<p>Tina Tah, Pat Ramsey Facilitated Discussion Tab 17. Facilitated discussion on how to apply PHN Informatics' concepts to specific IHS electronic tools.</p> <p>Content:</p> <ul style="list-style-type: none"> • Review PHN Nursing manual. • Question and answers from the participants.
11:30-1:00	Lunch

Time	Wednesday Audience: PHN Directors, PHN Program Managers, PHN Super Users Warm Invitation to Medical Record Coders, Billing
1:00- 2:30	<p>Mike Gomez and Pat Ramsey Public Health Activity Electronic Data From Local to Global Tab 18. At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Articulate the synergies between local electronic data capture and global data repositories from which overall performance measures can be analyzed. Assimilate this understanding and advocate for accurate local data capture. <p>Content:</p> <ul style="list-style-type: none"> • Discuss the concept of electronic garbage in-garbage out, and how local accuracy of electronic documentation is the foundation for global meaningful measures. • Explain the electronic technological process of gathering local data from multiple facilities into a large electronic repository. • Elaborate on how global repositories can be used to identify health trends in both large and local population. • Demonstrate electronic reporting from a large repository of public health nursing electronic data.
2:30-2:45	Break
2:45-4:30	<p>Dayle Knutson, Tina Tah, and Mike Gomez Public Health Activity Electronic Data From Local to Global. At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Assimilate understanding of the technological concepts involving global electronic data repositories and advocate for accurate local data capture. <p>Content - Facilitated discussion:</p> <ul style="list-style-type: none"> • Open discussion of IHS Public Health Nursing's documentation process. • Understand implications of PHN charting in EHR to Data Mart reports - Understand POV, Visit Location, Service Category, Clinics. • Discuss impact of standardization and best practice guidelines on global data repository management reporting and billing. • Discuss roles which need to be involved in a process to adopt best practices in a facility-wide comprehensive implementation (billing, medical records, nursing...).
4:30	Dismiss for the day.

Time	Thursday Audience: PHN Directors, PHN Program Managers, PHN Super Users, PHN Staff
8:30-8:45	Welcome Staff PHNs and review Agenda for Thursday and Friday. The PHN Scavenger Tool is a prerequisite for today's session.
8:45-9:15	Alena George Putting Together Public Health Nursing EHR Best Practices Tab 19. At the end of this session, participants should be able to: <ul style="list-style-type: none"> • Independently and comprehensively elaborate on PHN documentation best practices. Content: <ul style="list-style-type: none"> • Explain and demonstrate components of best practice electronic documentation for public health nursing.
9:15-10:00	Neva Kayaani Putting Together Public Health Nursing EHR Best Practices. A hands on practice At the end of this session, participants should be able to: <ul style="list-style-type: none"> • Demonstrate comprehensive understanding of PHN documentation best practices. Content: <ul style="list-style-type: none"> • Participants will be given several PHN case scenarios and asked to document in this hands-on practice. Facilitators are available on site to assist with computer logistics.
10:00-10:15	Break
10:15-10:45	Neva Kayaani, Alena George Putting Together Public Health Nursing EHR Best Practices. Question/Answer. At the end of this session, participants should be able to: <ul style="list-style-type: none"> • Deepen comprehensive understanding of PHN documentation best practices and think through nuanced case scenarios. Content: <ul style="list-style-type: none"> • Provide suggested formulation of scenarios for evaluation of hands-on practice. • Question / Answer from participants.
10:45-11:30	Alena George Consults and Effective Communication. At the end of this session participants should be able to: <ul style="list-style-type: none"> • Recognize how use of electronic consults and notifications promote patient tracking technologies and foster interdisciplinary care. Content: <ul style="list-style-type: none"> • Review and examine the electronic consult process from beginning to end. • Discuss electronic patient tools which promote coordination of care and collaboration between interdisciplinary providers. • Generate a consult tracking report to illustrate proficient closed loop communication. • Show how utilization of a structured input template ensures needed information is included in consult requests.
11:30-1:00	Lunch

Time	Thursday Audience: PHN Directors, PHN Program Managers, PHN Super Users, PHN Staff
1:00- 1:30	<p>Dr Bill Flood Electronic Tools for Well Child Program Management Tab 20.</p> <p>At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Articulate how a well-child program can be enhanced with the use of an evidence based measurement tool such as the ASQ. <p>Content:</p> <ul style="list-style-type: none"> • Name the content of the four parts of the EHR Well Child Module (Growth Curves, Education, ASQ, Care Reminders). • Understand what information can be entered using the WCM (eg education and ASQ) and what information is simply displayed (growth curves and reminders). • Tell how these displays can be customized (KB Editor) and who should have keys and be responsible for this action. • Be able to use the WCM both inside the EHR and on a free-standing desktop application. • Name the keys needed to access and use the WCM (really no keys, just two brokers, but a constant source of confusion). • Understand the use of the WCM as a part of a visit, and how it interacts with the provider TIU templates for a visit.
1:30-2:30	<p>Cecelia Butler Breastfeeding Toolkit Tab 21.</p> <p>At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Recognize the importance of an electronic toolkit in meeting the Breastfeeding component of the Baby Friendly Initiative. The initiative will use quality improvement processes to improve breastfeeding rates through new maternity care and infant feeding practices. <p>Content:</p> <ul style="list-style-type: none"> • Emphasize the importance for all PHNs to properly document all patient education in electronic health records. • Discuss the many aspects of Health Communications, Health Literacy and JCAHO educational requirements as they relate to this initiative. • Present an overview of the new electronic toolkit on breastfeeding and explain it's role in meeting the Ten Steps to Baby Friendly Initiative.
2:30-2:45	Break
2:45-3:15	<p>Janna Morris Point of Care Lab Tests Tab 22.</p> <p>At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Differentiate between Laboratory vs. Nursing/Text EHR Quick Orders. <p>Content:</p> <ul style="list-style-type: none"> • Change date and time of test. • Result Laboratory Tests using the POC Button. • Enter canned and free text comments. • Find results on Lab tab.

Time	Thursday Audience: PHN Directors, PHN Program Managers, PHN Super Users, PHN Staff
3:15-4:30	Susan Richards and Elvira Mosley PHN specific structured electronic nursing notes Tab 23. At the end of this session participants should be able to: <ul style="list-style-type: none">• Implement PHN standardized electronic Note structures for public health nursing. Content: <ul style="list-style-type: none">• Discuss and demonstrate how electronic Reminders can improve (25 minutes each):<ul style="list-style-type: none">– Discharge planning (Susan Richards).– Immunization workflow (Elvira Mosley).• Demonstrate SuperBill for immunization (Randy Haigh).
4:30	Dismiss for the day.

Time	Friday Audience: PHN Directors, PHN Program Managers, PHN Super Users, PHN Staff
8:30-8:45	Review of Previous Days Training
8:45-9:00	<p>Theresa Tsosie-Robledo Nursing Informatics Tab 24.</p> <p>At the end of this session participants should be able to:</p> <ul style="list-style-type: none"> • Recognize the impact Health Information Technology and informatics has on improving the delivery of health care services and patient care. <p>Content:</p> <ul style="list-style-type: none"> • Define Health Information Technology, Informaticist, and Informatician. • Present several examples of how Nursing/Medical/Clinical Informatics affects clinical practice, administration, education, and research. • Examine the role of nursing informatics in the Public Health setting.
9:00-10:00	<p>Joanna Kelsey PHN Practice and case management tools Tab 25</p> <p>iCare Nuts and Bolts is a Prerequisite for this presentation.</p> <p>At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Explore the principles of population management through electronic case management tools. <p>Content:</p> <ul style="list-style-type: none"> • Illustrate population management techniques utilizing PHN specific case scenarios. • Analyze and edit patient and population clinical data utilizing a patient case management software tool. • Discuss how a case management tool and GPRA measures can improve patient care. • Demonstrate how a case management tool can improve meaningful use of electronic data in public health nursing.
10:00-10:15	Break
10:15-11:30	Joanna Kelsey Continued, PHN Practice and case management tools.
11:30-11:45	<p>David Taylor and Phil Taylor Public Health Nursing Electronic Health Record Learning Community Tab 26.</p> <p>At the end of this session, participants should be able to:</p> <ul style="list-style-type: none"> • Independently access guidelines to implement PHN best practices for optimizing patient care in utilizing available health information technologies. <p>Content</p> <ul style="list-style-type: none"> • Provide information of PHN Learning Communities and knowledge acquisition opportunities: IHS EHR Web page, ftp site, PHN listserv, PHN template share, OIT offerings, recorded education classes (immunization and case management tools).
11:45-12:00	Facilitators Wrap up and evaluations
12:00	Dismiss

5.0 Biographical Sketches

CAPT (ret) David R. Taylor, MHS, RPh, PA-C, RN, NCPS EHR Training and Deployment Manager IHS Office of Information Technology

CAPT (ret) David Taylor is a retired Commissioned Officer in the United States Public Health Service and is a certified physician assistant, registered pharmacist, and registered nurse. Captain (ret) Taylor holds more than 35 years of public health, clinical, and clinic-administrative experience in the Indian Health Service (IHS). During his commission, he has served as a pharmacist, physician assistant, quality manager, risk manager, and compliance officer for the Pine Ridge, South Dakota and Cherokee, North Carolina Indian Hospitals. He has also served as an HIV/AIDS/STD consultant, performance improvement consultant, pharmacy consultant, and diabetes clinical consultant for the Nashville Area Indian Health Service. At this time, he is the EHR Deployment Manager for the IHS Office of Information Technology and has been charged with both training and deployment of the Electronic Health Record throughout the entire Indian Health Care system. David Taylor has been awarded the PHS Meritorious Service Medal (MSM) in recognition for his accomplishments in the EHR arena.

Philip Taylor, BA, RN, Clinical Application Specialist Contractor (Medsphere)

Phil is a Clinical Consultant for Medsphere Systems Corporation. Phil has been a Registered Nurse for over 30 years. He holds a degree in Nursing from Vincennes University and a B.A. in Classical Studies from Indiana University. Phil provided clinical application support to VA Medical center staff using the Vista electronic medical record system for over 12 years prior to joining Medsphere. Phil's clinical history was primarily in Psychiatric Nursing. Currently Phil's primary responsibilities are providing training support (such as Basic CAC School and EHR for Inpatient) and configuration/setup support to OpenVista/EHR installations.

CAPT Theresa Tsosie-Robledo, MS, BSN, RNBC OIT EHR Nursing Consultant/Informaticist

CAPT Theresa Tsosie-Robledo has been a registered nurse with IHS for 29 years. CAPT Tsosie-Robledo received her nursing degrees from Brigham Young University, Arizona State University and the University of Minnesota. She has worked in the Navajo, Phoenix and Albuquerque Areas of IHS. CAPT Tsosie-Robledo's primary background is public health nursing/health promotion and is board certified in Public Health Nursing. CAPT Tsosie-Robledo current assignment is with the OIT focusing on EHR Deployment and implementation. She looks forward to being instrumental in making the use of EHR more meaningful.

LCDR Mollie Ayala, MHI

OIT USET EHR Deployment Coordinator and BCMA Co-Project Manager

LCDR Mollie Ayala is a Commissioned Officer with the United States Public Health Service and has been with the Indian Health service and the Phoenix Area since 2002. She is a graduate of Arizona State University with a Masters degree in Healthcare Innovation. In addition, she has served in a variety of positions ranging from IT Specialist where she implemented an area Help Desk system that is still currently providing a centralized level of support for all Phoenix area facilities. Her current role is to serve as a Deployment Coordinator/CAC for the ARRA EHR “Meaningful Use” training and deployment program.

CAPT Deborah Burkybile, MSN, RN, CPC

OIT USET EHR Training and Deployment Specialist

Deborah has been a Registered Nurse for more than 30 years. During this time her nursing practice led her to work in a variety of private sector hospitals, clinics, tribal facilities, and for the last 20 years in Indian Health Service. Ms. Burkybile is a citizen of the Cherokee Nation of Oklahoma. She received her commission in the U.S. Public Health Service in 1988 and works from the Nashville Area Office, Indian Health Service where she had served Tribes and IHS facilities in the role of Area Managed Care Consultant. Currently she has been assigned to support the implementation of the Indian Health Service Electronic Health Record by assisting the IHS Office of Information Technology as one of the EHR Implementation Team Consultants. Ms. Burkybile is also a Certified Professional Coder and has worked diligently with the Nashville Area Tribes to train and certify coding professionals at the Service Unit, Tribal, and Urban levels. Health Care Compliance is another field of particular interest and work for Ms. Burkybile. Ms. Burkybile’s knowledge and expertise in nursing has enabled her to provide assistance to Indian Health Service, Tribal, and Urban facilities from both clinical and business perspectives with a focus on quality health care service delivery.

Jennifer Appel Downs, BSBA

**EHR Deployment Project Coordinator / Business Systems Analyst
Contractor - DNC**

Jennifer is an EHR Deployment Project Coordinator in the OIT located in Albuquerque, NM. Jennifer attended school at Northeastern University, where she pursued a BS in Business Administration and Management Information Systems. Prior to relocating to New Mexico, she worked at John Hancock Financial in Boston, MA in the U.S. Divisional PMO as the Program Coordinator for a company wide data masking initiative. Before the completion of her BSBA, her work experience includes 11 years as the Coordinator and Office Manager for a multi-site Ophthalmic practice in western MA

**Kathy Ray, CNM, CAC, FATA
CIMTAC Chair**

Kathy is a Clinical Applications Coordinator at Parker IHS, Parker, AZ, since October 2005. During that time she has also (under protest) been the Federal Agency Travel Administrator and implemented GovTrip. Prior to moving to Parker, Kathy had been with the Rosebud Sioux on the Rosebud Indian Reservation in South Dakota as a permanent employee since 1994, and worked there as a locums in 1993. Her job there as a Certified Nurse Midwife was always challenging! Kathy has worked with the Women's Health Package since 1996 – when it was first released. She is currently the Federal Lead for the new Women's Health Package, which will be coming out as a part of iCare. She enjoys working with various RPMS packages and EHR, and training others on how to use them

Alena George, MS, BSN, RN

Alena George has been in Information Technology for 22 years and an RN for 4 years. Alena completed the Public Health Nurse Intern program in 2009. She is a member of the Cheyenne Nation and works in the Whiteriver Service Unit as a Public Health Nurse. Alena's knowledge and expertise in information technology has enabled her to provide assistance to the Whiteriver Public Health Nursing department, moving her team towards a paperless environment.

Toni Hackney, BSN, RN

Toni Hackney, RN, Nurse Consultant II, RPMS Program Manager. She completed her nursing at University of Alaska Anchorage. She has been a Registered Nurse in Public Health Nursing for 15 years. Toni has worked in rural Alaska, and has also worked on a special project within Social Services. Toni currently works for the State of Alaska as a Nurse Consultant II, Informatics. During this time she has worked diligently to train public health nurses, administrative staff, and nursing management in the Resource Patient Management System (RPMS) across the state of Alaska. Ms. Hackney's knowledge and expertise in nursing has enabled her to provide assistance to the State of Alaska, Tribes across Alaska and Urban facilities from both clinical and technical perspectives with a focus on quality health care service delivery.

Joanna Kelsey, BSN

Joanna Kelsey is a Registered Nurse and a contractor for the Indian Health Service Office of Information Technology. She is a user support and training specialist for the RPMS iCare application and HIV Management system. She has been a registered nurse for over 35 years. She has many years of experience in public health, including 6 years with the Indian Health Service and has expertise in chronic disease management, long-term care, risk and quality management. She has utilized multiple clinical software applications in her nursing practice.

Patricia A. Ramsey, RN

Pat Ramsey has worked in nursing and nursing management since graduation until 1991. She then worked in Quality Management before retiring from Indian Health Service after 23 years of service. Since retirement, Pat has worked in nursing and public health informatics to include (a) GPRA data assessment, (b) Public Health Nursing data assessments, (c) Diabetes data assessments, (d) Immunization Data Assessments, (d) Data clean up, and (e) PHN documentation and coding.

Susan Pierce-Richards, MSN, ARNP, FNP-BC, ANP-BC

CDR Pierce-Richards is a Commissioned Officer in the United States Public Health Service assigned to the Office of Information Technology as a Clinical Informaticist for EHR, Clinical Reminders and related packages since 2008. She received her BS in 1996 from Johnson State College and MSN in 1999 from MGH Institute of Health Professions. She joined the USPHS in 2004, was assigned to the Yakama Service Unit as a Nurse Practitioner. She then led the EHR Implementation at the Yakama Service Unit and served as its Clinical Applications Coordinator from 2005-2008. She brought several years of nursing experience to IHS including advanced practice experience in the Emergency Department, Pediatrics, Family Practice and Forensics. Nursing is her second career. She entered uniformed service in 1987 in the Vermont Air National Guard, served full time (civil service) as a precision measurement equipment calibration and testing technician for 8 years. She served in Americorps for 2 years during graduate school delivering primary care services to medically underserved communities in southeastern Massachusetts. In addition to full time clinical practice, CDR Pierce-Richards was commissioned as First Lieutenant (O-2) in the Vermont Air National Guard in 1999 and served as Assistant Chief Nurse until her transfer to the USPHS in 2004.

Pamela A Michaelson-Gambrell RN, BSN, MSN

Prior experiences include basic instructions for Registered nursing students and development of critical thinking skills at the Community College level. Knowledge in writing objectives for programs and implementing education to students and the community.

In 2009 attended the first training session of PHN/EHR informatics and assisted in facilitation of the program to the Tucson area employees. At this time working in the field has allowed me the ability to help PHN nurses learn how to document in the nurses notes the care administered with focus on GPRA, screening and education needs of the patients

Janna Morris MPA, MT(ASCP)

Janna Morris is a Medical Technologist in the United States Public Health Service and has worked in the Indian Health Service since 1982. Janna is a certified Medical Technologist and formerly served as the Laboratory Manager at Rapid City Indian Hospital. Janna has been involved in reference lab interfacing since the early 1990s, and is now currently assigned to OIT as a National Laboratory Medical Informatics Consultant.

CAPT Tina Tah BSN, MBA

CAPT Tina Tah is assigned to the Indian Health Service to serve as the Acting Senior Nurse Consultant for Public Health Nursing within the Division of Nursing. Currently she is the Office of Clinical and Preventive Services Grant Coordinator for the Indian Health Service and has 24 years of service as a USPHS Commissioned Corps Officer. During this time, CAPT Tah has served in various capacities such as Staff Nurse, Public Health Nurse, Director of Public Health Nursing, Acting Director of Division of Clinical Quality, and Public Health Nurse Consultant, Area Diabetes Consultant (Diabetes/Public Health Nursing/Immunizations). CAPT Tah has served in the Indian Health Service at the local, area, and Headquarters level which includes both staff and management assignments. She is a Registered Nurse and received a BSN degree from the University of Arizona, Tucson, AZ (12/1986) and a MBA degree in 2004.

William Flood MD

Pediatrician with IHS since 2001. Pediatric Subject Matter Expert for IHS in development of Well Child Module for PCC+ and later EHR. EHR and PCC+ lead for Inscription House Health Center beginning 2003. Transferred to Chinle in 2008 to help implement EHR in a larger Inpatient facility. Member of EHR Change Control Board and CIMTAC. Has helped teach Basic CAC School, EHR Reminders, EHR for Meaningful Use. Chinle has been a beta test site for numerous EHR patches and upgrades. Dr Flood has been recognized as the CEO Outstanding Health Care Provider, Kayenta Service Unit Employee of Year, Navajo Area Director's Award, and three IHS Director's Awards (two group, one individual).

Cecilia Butler MS, RD, CDE

Cecilia Butler is employed at the Santa Fe Service Unit where she directs the clinical and ambulatory nutrition services for the hospital and field health clinics. She is a member of several National IHS workgroups including the IHS National Patient Education Committee and is a CDE consultant for Division of Diabetes Treatment and Prevention. She has extensive knowledge and expertise as a training instructor and presenter for various professional groups and has written several published articles, co-authored a book on MNT Reimbursement and has been a reviewer for IHS and ADA publications. In 2011 Cecilia was detailed to the IHS Headquarters in Rockville, MD to serve as the agency lead representative for the *Let's Move in Indian Country* interagency Initiative for IHS.

CAPT Elvira Mosely, MSHS, RN

Elvira Mosely, RN, is the Clinical Program Consultant for the Electronic Health Records (EHR) for Phoenix Area Indian Health Service. She received her BSN degree in 1988 from Jacksonville University in Jacksonville Florida and received her MSHS degree in 2006 from Touro University California. She worked as the Clinical Application Coordinator for the Hopi Health Care Center for 1yr before she applied and was accepted to be the Clinical Program Consultant for the Phoenix Area Indian Health Services on June 2006. Prior to this she served for the US Air Force on active duty status for 11 years serving in a wide range of nursing positions. In 2004 she transferred to the US Public Health Service and is presently on Active Duty status assigned to Phoenix Area Office. Elvira has been the lead project manager for the implementation and coordination of the RPMS EHR for all Phoenix Area Indian Health Services since June 2006.

Faculty Disclosure Statement:

As a provider accredited by ACCME, ANCC, and ACPE, the IHS Clinical Support Center must ensure balance, independence, objectivity, and scientific rigor in its educational activities. Course directors/coordinators, planning committee members, faculty, and all others who are in a position to control the content of this educational activity are required to disclose all relevant financial relationships with any commercial interest related to the subject matter of the educational activity. Safeguards against commercial bias have been put in place. Faculty will also disclose any off-label and/or investigational use of pharmaceuticals or instruments discussed in their presentation. The course directors/coordinators, planning committee members, and faculty for this activity have completed the disclosure process and have indicated that they do not have any significant financial relationships or affiliations with any manufacturers or commercial products to disclose.

Phil Taylor has disclosed he is a Clinical Consultant for Medsphere Systems Corporation.

Mr. Taylor's presentations have been reviewed, and no conflicts of interest were found. Mr. Taylor will not be promoting any products or companies with which he has a financial relationship during his presentation.