



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Monthly Health Information Technology

(HIT)

Systems Assessment Guide

Version 1.0
July 2024

Office of Information Technology
Division of Information Technology

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Version History

Version 1: Due to the current state of the HIT system in the Indian Health Service this version is focused on the Electronic Medical Record (EMR) that is currently in use (RPMS/EHR). Future versions will encompass other EMRs.

Purpose

To assist the local HIT team by providing a review of definitions, recommendations, methods, and associated reports to assess the local HIT systems status.

Vision

To provide the local HIT team a resource to aid in HIT systems optimization and help the local HIT team to create a plan to address deficiencies identified by system review.

Value

To prioritize humble and transparent collaboration within the local HIT team to aid in systems optimization.

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1.0 Health Information Technology (HIT) Team

An effective HIT team is comprised of individuals performing the following roles:

- Site Manager
- Clinical Informaticist
- Health Information Management (HIM)
- Package Owner
- Super User(s)
- Other members as determined by facility

1.1 Example HIT Team Members

- Informatics
- Pharmacy
- Laboratory
- HIM
- Radiology
- Nursing
- Information Technology
- Clinical Teams
- Others

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2.0 Year Tracking Calendar

Facility:					Informatics in Charge:							
Monthly Informatics Assessment	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
	Initials	Initials	Initials	Initials	Initials	Initials	Initials	Initials	Initials	Initials	Initials	Initials
Monthly Patch Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Figure 16-1: Resource File Report example Error Trap Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Patch Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Package Owners Assignment Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Super User Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Health Summary Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Education Picklist Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Super-Bill Education Associations Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Super-Bills Current Procedural Terminology (CPT) Picklist Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.

Facility:					Informatics in Charge:								
Current Procedural Terminology (CPT) in Reminders	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Quick Orders Review:	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Integrated Problem List (IPL) Picklist Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
TIU Template Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Teams List Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Consult Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
PCC Master Control Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Figure 15-4: Pending Consult example CIANB Resources Setup and Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Parameter Setup Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
TaskMan Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Monthly Data Export Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Order Checks and Local Terms Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.

Facility:					Informatics in Charge:								
Figure 21-1: Enable/Disable an Order check example Health Information Management (HIM) Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Figure 22-2: Unsigned/co signed report example Note Title Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Figure 23-1: Title Clean Up Report Example Immunization Package Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
(BYIM) Immunization interface management review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Clinical Reminders Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Notifications and Alerts Settings Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Figure 27-3: TaskMan Management , XQALERT DELETE OLD Example Taxonomy Management Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Allergy Reaction Tracking Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.

Facility:					Informatics in Charge:								
Figure 29-2: Adverse Reaction Tracking Verifier menu, Verify patient reaction data Mailman Group Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Figure 30-1: Mail Group List Report Example VueCentric Template (EHR GUI) Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
User in the System	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Signature Block Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
RPMS EHR Training Program Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.
Demo Patient Review	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.

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3.0 Monthly Patch Review

- Updated patches ensure RPMS operates properly, with most accurate national updates and standards.
- Extenuating circumstances may delay patches, but system updates should happen as soon as possible for continued stable functionality of RPMS.

Recommendations

- Monthly assess current patches on system and work closely with RPMS administrator or Area RPMS support to ensure system stays up-to-date.

Identified Collaborative Team

- RPMS Administrator or Area RPMS Support.

3.1 Method

Review patch notes and manuals to ensure appropriate staff are made aware of new and changing features. Consider developing a communication plan between all stakeholders for patch installation. Confirm you are on appropriate email listservs to receive up-to-date information about upcoming patches (EHR, Icare, BMW, etc.) <https://www.ihs.gov/listserv/topics/> . Most recent patches and manuals can be viewed at: <https://www.ihs.gov/rpms/applications/clinical/>

However, a few (i.e., BPRM) will be found at: <https://www.ihs.gov/rpms/applications/administrative/>

Compare this list of current patch levels with local system> Local system patch levels can be accessed on the DISPLAY PATCHES FOR A PACKAGE menu option in RPMS.

- Potential menu paths
 - AKMOCORE--> EHR CAC MENU (EHRC)--> DISPLAY PATCHES FOR A PACKAGE
 - IHS Kernel Option ->AKMOEVE ->PROGRAM OPTIONS (PROG) ->KIDS ->UTILITIES -> DISPLAY PATCHES FOR A PACKAGE

4.0 Package Owners Assignment Review

Package Owners are local primary subject matter experts (SME) responsible for providing critical system analysis for implementation and the ongoing support of components to ensure optimal functionality of an assigned clinical package.

- Provide end-user training, guidance, and assistance.
- Collaborate with the service unit informaticist on system enhancements, modifications, and troubleshooting.
- Serve as a point of contact for further troubleshooting issues that are unable to be resolved locally.

4.1 Recommendation

- Identify local Package Owners and create a list of their assigned packages.
- Train Package Owners so they can fulfill their role.
- Consider including them as a member of the local Change Control Board or local Health Information Management Committee (HIMC).

4.2 Identified Collaborative Team

Clinical and Health Informatics in collaboration with a Change Control Board or other local leadership committee.

4.3 Method

Below is an example chart that could be adopted locally to document Package Owner assignments:

Table 4-1: Example Chart of Package Owner Assignments

RPMS Package	Identified Owner/Back-up	Department
Patient Registration (AG)	(TBD by site)	Business Office
Third Party Billing (ABM)	(TBD by site)	Business Office
Accounts Receivable (BAR)	(TBD by site)	Business Office
Clinical Reminders (PXR)	(TBD by site)	Clinical Informaticist
Computerized Patient Record System (CPRS) aka EHR RPMS	(TBD by site)	Clinical Informaticist
Immunization Interface Management (BYIM)	(TBD by site)	Clinical Informaticist/Information Technology/Nursing

RPMS Package	Identified Owner/Back-up	Department
Patient Care Component Suite (PCC) - Data Entry (APCD) and Coding Queue	(TBD by site)	Coding-HIM
Contract Health Services (ACHS)	(TBD by site)	Contract Health Service/Purchase Referred Care
Purchase Referred Care Information System (BMC)	(TBD by site)	Contract Health Service/Purchase Referred Care
Dentrix®	(TBD by site)	Dental
Diabetes Management System (BDM)	(TBD by site)	Diabetes Coordinator
CCD Clinical Summary (BJMD)	(TBD by site)	HIM
Consult Tracking (GMRC)	(TBD by site)	HIM
Patient Information Management System (PIMS)	(TBD by site)	HIM
Personal Health Record (PHR)	(TBD by site)	HIM
Practice Management Application Suite (BPRM)	(TBD by site)	HIM
Text Integrated Utilities (TIU)- Templates, Health Summary Components (BHS/APCH)	(TBD by site)	HIM
Text Integrated Utilities (TIU)- Reports, Retracting Notes	(TBD by site)	HIM
Patient Scheduling w/in Practice Management Application Suite (BPRM)	(TBD by site)	Patient Scheduling
Laboratory (LR) and Quick Order/Menus	(TBD by site)	Laboratory
Electronic Laboratory Reporting System (BLE)	(TBD by site)	Laboratory
Well Child Component (VEN)	(TBD by site)	Medical
Women's Health (BW)	(TBD by site)	Medical
Emergency Department Dashboard (BEDD)	(TBD by site)	Nursing; Medical

RPMS Package	Identified Owner/Back-up	Department
Emergency Room System (AMER)	(TBD by site)	Nursing; Medical
Immunization (BI)	(TBD by site)	Nursing; Pharmacy
Bar Code Medication Administration (BCMA)	(TBD by site)	Nursing; Pharmacy
Adverse Tracking Package (GMRA)	(TBD by site)	Pharmacy
Controlled Drug Export (BPDM)	(TBD by site)	Pharmacy
ePrescribing (BEPR)	(TBD by site)	Pharmacy
ePrescribing of Control Substance (BEPC)	(TBD by site)	Pharmacy
Pharmacy Outpatient (PSO) and Quick Order/Menus	(TBD by site)	Pharmacy
Pharmacy Inpatient (PSJ) and Quick Order/Menus	(TBD by site)	Pharmacy
AudioCare®	(TBD by site)	Pharmacy; Patient Scheduling
Clinical Reporting System (BGP)	(TBD by site)	Quality Management
iCare Population Management (BQI)	(TBD by site)	Quality Management
Radiology and Quick Order/Menus	(TBD by site)	Radiology

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5.0 Super User Review

- Super users are departmental contacts for clinical informatics and training issues.
- They work together to identify issues for the department, address those issues and provide direct department training and support.
- Ideally, Clinical Informatics trains the Super User and the Super User trains other members of their department, This Super User provides orientation to new staff or addresses training issues identified locally. Usually, this is the department supervisor unless otherwise designated.

5.1 Recommendations

Identify and train Super Users for each department.

Identify Collaborative Team Clinical Informatics in collaboration with the department supervisor or other leadership committee.

5.2 Identified Collaborative Team

Clinical and Health Informatics in collaboration with the department supervisor or other leadership committee.

5.3 Method

Below is an example chart that could be adopted to document Super User roles:

Table 5-1: Example Chart of Super User Roles

EHR Role	Staff Member
Principal Clinical and Health Informaticist	(TBD by site)
Informaticist (Pharmacist)	(TBD by site)
Informaticist (Laboratory Tech)	(TBD by site)
Informaticist (Radiology Tech)	(TBD by site)
Informaticist (HIM Lead - TIU)	(TBD by site)
Physician Informatics Champion	(TBD by site)
Nurse Informatics Champion	(TBD by site)
Super User (Business Office)	(TBD by site)
Super User (Immunization)	(TBD by site)
Super User (PHN)	(TBD by site)
Super User (Patient Registration)	(TBD by site)
Super User (Patient Scheduling)	(TBD by site)
Super User (Quality Management)	(TBD by site)

EHR Role	Staff Member
Super User (Diabetes)	(TBD by site)
Super User (Women’s Health)	(TBD by site)
Super User (Information Technology)	(TBD by site)
Super User (Behavioral Health)	(TBD by site)
Super User (Dental)	(TBD by site)
Super User (Nutrition/Dietary)	(TBD by site)

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6.0 Health Summary Review

A Health Summary is a clinically oriented, structured report that extracts different kinds of data from RPMS EHR and displays it in standard format. The different Health Summary Types are:

- IHS
- VA

6.1 Recommendations

- Rebuild Health Summary yearly or with every patch that affects Health Summaries.
- Activate Health Summary components as needed. Health Summary individual components may need to be activated in order to be used.
- Periodically review the Health Summaries available with users to determine if they are still useful. Make updates and remove unnecessary Health Summaries based on feedback.

6.2 Identified Collaborative Team

- Clinical and Health Informatics with a Multidisciplinary team.

6.3 Methods

To Rebuild Health Summaries, use RPMS menu option Rebuild Ad Hoc Health Summary Type (RBL).

- Example menu path to reach Rebuild Ad Hoc Health Summary Type (RBL) option:

– EHR CAC Menu (EHR)→ RPMS-EHR Configuration Master Menu (BEH) –> Report Configuration (RPT)→ Health Summary Configuration (HSM)→ VHA Health Summary Configuration (VHA)→ Health Summary Maintenance Menu (MNT)→ Rebuild Ad Hoc Health Summary Type (RBL)

Review available components list and determine if any need to be activated.

- Example menu path to Edit Ad Hoc Health Summary Type (ADH):
 - EHR CAC Menu (EHR)→ RPMS EHR Configuration Master Menu (BEH)→ Report Configuration (RPT)→ Health Summary Configuration (HSM)→ VHA Health Summary Configuration (VHA)→ Health Summary Maintenance Menu (MNT)→ Edit Ad Hoc Health Summary Type (ADH)
- Access this ADH Edit Ad Hoc Health Summary option and answer “no” to the prompt Suppress Print of Components without data: and then answer “yes” to the prompt Do you wish to review the Summary Type structure before continuing?

- >>> EDITING the GMTS HS ADHOC OPTION Health Summary Type
- SUPPRESS PRINT OF COMPONENTS WITHOUT DATA: no//
- Do you wish to review the Summary Type structure before continuing?/Yes
- Tip: Some lesser-known components that may be useful to activate and explore uses:
 - BPN PROGRESS NOTES BRIEF
 - DCS DISCHARGE SUMMARY
 - BDS DISCHARGE SUMMARY BRIEF
 - EXAM PCE EXAMS LATEST

Note: Review each newly activated component and test it in collaboration with your multidisciplinary team.

Example of ADH menu option if accessed as above in Methods section:

- Look for items that may be useful as well as disabled components marked with an *, and consider activating if interested:

HEALTH SUMMARY TYPE INQUIRY									
		Type Name: GMTS HS ADHOC OPTION							
		Title: Ad Hoc Health Summary Type							
		Owner:				LOCK: GMTSMGR			
		SUPPRESS PRINT OF COMPONENTS WITHOUT DATA: no							
		SUPPRESS SENSITIVE PRINT DATA: 0							
Abb	Ord	Component Name	Max	Hos	ICD	Pro	CPT		
Selection			Occ	Time	Loc	Text	Nar	Mod	
	5	Care Plans by date							
CPR	10	Plans by problem							
GDT	15	Goals by date							
GPR	20	Goals by problem							
AIPL	25	Active IPL	10						
AWL	30	Active Wait List							
AMI	35	AMI	10	1Y					
CD	40	Advance Directive							
BADR	45	Brief Adv React/All							
ADR	50	Adv React/Allerg							
		*Disables Components							

Figure 6-1: ADH Menu

7.0 Education Picklist Review

Education picklists are used by providers to more efficiently document single or multiple education codes, improving user experience, and decreasing their cognitive load.

7.1 Recommendations

- Review existing education picklists.
- Collaborate with SMEs and HIM to ensure picklists are populated with appropriate education topics.

7.2 Identified Collaborative Team

- A multidisciplinary team, including users of the picklist in collaboration with HIM and other SMEs.

7.3 Method

- Run Report on Education Picklists.
- Copy/paste option.
- Go to VA FileMan -> Print File entries
- FileMan file = BGO ED TOPIC PREFERENCES
- Copy from the top until the line right above ;:999999999
- Paste at the "OUTPUT FROM WHAT FILE: //"

Special Notice: The below report and others like it in this document are written for "first use" cases. Within these reports you will see "Store in sort template:", or "Store in print template:" with text following. The text is the "name" of the template that was saved to make future use easier (make sure to note this text if you don't use what is suggested in this document for future use). Subsequent uses of these reports after creating them can use this name instead of rebuilding each time.

Below is an example of how you retrieve a sort/print template:

Go to VA FileMan-> Print File entries.

```

OUTPUT FROM WHAT FILE: HEALTH FACTORS// BGO ED TOPIC PREFERENCES
                                     (3 entries)
SORT BY: NAME// [NCI ED TOPIC REVIEW SORT
    
```

Figure 7-1: Output from file

```

BGO ED TOPIC PREFERENCES
@EDUCATION TOPIC
@EDUCATION TOPIC:
@INACTIVE FLAG'@
FIRST
]

NCI ED TOPIC REVIEW SORT
Y

NAME_ " -----";R1;C1
EDUCATION TOPIC
EDUCATION TOPIC:
MAJOR TOPICS PTR_ "-";R2;C5

(" _EDUCATION TOPIC_ " );R2;
EDUCATION TOPIC:
" * "_INACTIVE FLAG_ "*" ;R2

"ALTERNATE POSSIBLE TEXT = "_DISPLAY TEXT;C10;R3;

";R3;S

NCI INACTIVE EDU TOPICS PRINT
Y
;;9999999999
    
```

Figure 7-2: BGO ED TOPICS PREFERENCES

- Entering directly prompt by prompt option:

Go to VA FileMan-> Print File entries.

```

OUTPUT FROM WHAT FILE: HEALTH FACTORS// BGO ED TOPIC PREFERENCES
                                     (3 entries)
SORT BY: NAME// @EDUCATION TOPIC
EDUCATION TOPIC SUB-FIELD: @EDUCATION TOPIC:
EDUCATION TOPICS FIELD: @INACTIVE FLAG'@
START WITH INACTIVE FLAG: FIRST// FIRST
    WITHIN INACTIVE FLAG, SORT BY: ]
    WITHIN INACTIVE FLAG, SORT BY:
STORE IN 'SORT' TEMPLATE: NCI ED TOPIC REVIEW SORT
                                     (May 06, 2022@11:01) User #1723 File
#90362.36 SORT

DATA ALREADY STORED THERE...OK TO PURGE? NO// YES
DESCRIPTION:
    No existing text
    
```

```

Edit? NO//
FIRST PRINT FIELD: NAME_ " -----";R1;C1
THEN PRINT FIELD: EDUCATION TOPIC (multiple)
  THEN PRINT EDUCATION TOPIC SUB-FIELD: EDUCATION TOPIC:
    THEN PRINT EDUCATION TOPICS FIELD: MAJOR TOPICS PTR_ "-";R2;C5
    THEN PRINT EDUCATION TOPICS FIELD:
  THEN PRINT EDUCATION TOPIC SUB-FIELD: ("_EDUCATION TOPIC_");R2;
  THEN PRINT EDUCATION TOPIC SUB-FIELD: EDUCATION TOPIC:
    THEN PRINT EDUCATION TOPICS FIELD: " *_INACTIVE FLAG_*";R2
    THEN PRINT EDUCATION TOPICS FIELD:
  THEN PRINT EDUCATION TOPIC SUB-FIELD: "ALTERNATE POSSIBE TEXT = "_DISPLAY
TEXT;C10;R3;
  THEN PRINT EDUCATION TOPIC SUB-FIELD:
THEN PRINT FIELD: "";R3;S
THEN PRINT FIELD:
Heading (S/C): BGO ED TOPIC PREFERENCES LIST Replace
STORE PRINT LOGIC IN TEMPLATE: NCI INACTIVE EDU TOPICS PRINT
                                (May 06, 2022@11:01) User #1723 File
#90362.36
TEMPLATE ALREADY STORED THERE.... OK TO REPLACE? Y (Yes)
    
```

Figure 7-3: VA FileMan, Entering prompt by prompt

- **DEVICE:** Could use screen/home if session logging or physical printer if a hard copy of this list is preferred.
- Consider Session logging the information via a telnet client (e.g. SecureCRT, Netterm) or directly printing the information by sending it to an RPMS Printer.

Note: If in need of assistance with Session logging or other processes in this document, please consider attending an EHR office hours.

7.4 Reports Example

- This list shows the name of the Education picklist on the first line of each subsection, then lists the education codes that are currently on that particular picklist. If the education code is noted as *INACTIVE*, remove it from the picklist.

```

Education Picklist:
-----
DEMO -----
  ABDOMINAL PAIN-(ABD-Complications) *INACTIVE*
    ALTERNATE POSSIBE TEXT =
  ABDOMINAL PAIN-(ABD-Disease Process) *INACTIVE*
    ALTERNATE POSSIBE TEXT =
  CHILD HEALTH-ADOLESCENT (12-18 YEARS)-(CHA-Alcohol and Other Drugs)
*INACTIVE*
    ALTERNATE POSSIBE TEXT = CHILD HEALTH - ADOLESCENT(12 to 18 years)
ALCOHOL AND OTHER DRUGS

SELINA -----
  CHILD HEALTH-TODDLER (1-3 YEARS)-(CHT-DIET 2006) *INACTIVE*
    
```

```

ALTERNATE POSSIBE TEXT =

TESTING 3 -----
ADMINISTRATIVE FUNCTIONS-(AF-Benefits Of Updating Charts) *INACTIVE*
ALTERNATE POSSIBE TEXT = SITE WANTED TO MANUALLY CHANGE
ADVANCE DIRECTIVES-(ADV-Living Will ) *INACTIVE*
ALTERNATE POSSIBE TEXT =
    
```

Figure 7-4: Report Example, Inactive

- Take this information to your HIT team (i.e., HIM/Coding/Clinician), and determine what the new education should be. Then go to the RPMS EHR Education Picklist and replace the code in the corresponding Education Picklist. See the *Clinical Informatics Webinar Series: Fundamentals & Skills* for more information.

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8.0 Super-Bill Education Associations Review

- Using the associations' functionality while building a Super-Bill picklist for users, one option is to associate Super-Bill namespace (a file or a folder) with education topics, CPT codes, SNOMED Term etc. A common example is setting up Immunizations as a Super-Bill picklist and associating the immunization, the administration CPT codes, education codes, etc. These Super-Bill picklists are used by users to efficiently document multiple CPT, education, and other types of codes, improving user experience and decreasing their cognitive workload.

8.1 Recommendations

- Review Super-Bill subeducation topic code associations to look for INACTIVE Flags.
- Correct collaboratively with SMEs and HIM to ensure associations are populated with appropriate non-INACTIVE Flags (basically active ones) education topics.

8.2 Identified Collaborative Team

- Multidisciplinary team that uses the picklist(s) in collaboration with SMEs, HIM, and Coding.

8.3 Method

There are a couple of general steps in this process:

- Run a FileMan report that shows all the Super-Bill picklists in the system and what associations are assigned to each.
- Look specifically for education codes among the associations. Education codes can be identified either by recognizing their names, or by noting the code in the last column on the FileMan report. A code of "AUTTEDT" ("means the line is an education code).

After identifying all the education codes that are used as associations in the Super-Bill picklists, check to see if any of them are INACTIVE Flags. Do this by inquiring into FileMan for each of the education codes and printing a list of them that will show which, if any, are inactive.

If there are inactive codes, then return to the original report list. Locate the codes, which picklists they are associated, then correct/replace the inactive flags with active education topics.

See instructions below on how to run these reports.

Run a Report on Education Codes in Associations:

- COPY and PASTE METHOD
 - Go to VA FileMan-> Print File entries.
 - Consider field by field entry option if this copy/paste method does not work.
- OUTPUT FROM WHAT FILE = BGO CPT PREFERENCES
 - Double-click the table below to bring up Excel then Copy from the top until the line right above ;;999999999
 - Paste at the “OUTPUT FROM WHAT FILE: //”

```
BGO CPT PREFERENCES

NAME;R1
CPT
ASSOCIATIONS
ASSOCIATIONS "^";C5;X;R2
" ` "_INTERNAL (ASSOCIATIONS) _ "^";X;R2

NCI INACT ED CPT PRINT
Y

;;999999999999999
```

Figure 8-1: BGO CPT PREFERENCES Report

- FREE TEXT LINE-BY-LINE METHOD

Alternative option for direct field by field entry:

- Go to FileMan-> Print File entries.

```
OUTPUT FROM WHAT FILE: BGO CPT PREFERENCES// BGO CPT PREFERENCES
(41 entries)

SORT BY: NAME//
START WITH NAME: FIRST//
FIRST PRINT FIELD: NAME;R1
THEN PRINT FIELD: CPT (multiple)
  THEN PRINT CPT SUB-FIELD: ASSOCIATIONS (multiple)
    THEN PRINT ASSOCIATIONS SUB-FIELD: ASSOCIATIONS "^";C5;X;R2
    THEN PRINT ASSOCIATIONS SUB-FIELD: " ` "_INTERNAL (ASSOCIATIONS) _ "^";X;R2
    THEN PRINT ASSOCIATIONS SUB-FIELD:
  THEN PRINT CPT SUB-FIELD:
THEN PRINT FIELD:
Heading (S/C): BGO CPT PREFERENCES LIST Replace
STORE PRINT LOGIC IN TEMPLATE: NCI INACT ED CPT PRINT
(Sep 20, 2019@13:59) User #1856 File #90362.31
TEMPLATE ALREADY STORED THERE.... OK TO REPLACE? Y (Yes)
```

```

DEVICE:  VT      Right Margin: 80//
-----
    
```

Figure 8-2: Alternative option

- Log Session this report.
- Use Notepad and clean up data. Remove headers/pages, and spaces.

Example:

```

BGO CPT PREFERENCES LIST          JUN 26,2023  13:46  PAGE 112
NAME
-----
    
```

Figure 8-3: Print File entries in VA FileMan

- In Notepad, in the ribbon bar, select **Edit**, and then select the **Replace** feature to find what “;” and replace with “^”. Click **Replace All**. Save new updates.
- In Excel, import data into Excel worksheet.
- Add a filter to the column C and filter to anything with “AUTTEDT”. Add a blank row to assist with the filtering function.

	A	B	C	D
1				
2	BP-CLINIC MEDS			
3	J2180	`101342	ICPT(
4	J2550	`101383	ICPT(
5	C9447	`679447	ICPT(
6	J1885	`741885	ICPT(
7	M-FOLLOW-UP	`236	AUTTEDT(
8	M-LITERATURE	`4300	AUTTEDT(
9	G0008	`710008	ICPT(
10		99411 `99411	ICPT(
11	CESSATION-SMOKER	`17	AUTTHF(
12	DENTAL CONSULT			
13		11901 `11901	ICPT(
14	D9130	`689130	ICPT(
15		92250 `92250	ICPT(
16		36416 `36416	ICPT(
17	D9320	`689320	ICPT(
18		25 `25	AUTTCMOD(
19	DL MEDS ADMINISTERED IN CLN			
20	Q0169	`810169	ICPT(
21	J2180	`101342	ICPT(
22	J2550	`101383	ICPT(
23	J1885	`741885	ICPT(
24	C9447	`679447	ICPT(
25	T1502	`841502	ICPT(
26	EM MEDS ADMINISTERED IN CLN			
27	J2180	`101342	ICPT(
28	C9447	`679447	ICPT(
29	T1502	`841502	ICPT(
30	M-INFORMATION	`4299	AUTTEDT(
31	J1885	`741885	ICPT(
32	FA 36416	`36416	ICPT(
33	GENERAL			

Figure 8-4: AUTTEDT filter

- Copy the contents in the column B with “ ` ” (aka as the Grave Accent) that is associated with the AUTTEDT (in column C) This indicates it is an education code. This is where the filtering of column C can be useful to only see the columns with AUTTEDT, making it easier to view and copy items form column B for the next step.
- Go to VA FileMan select **Inquire**.
- At OUTPUT FROM WHAT FILE: EDUCATION TOPICS.
- At the “Select EDUCATION TOPICS NAME:”, paste the parse data (Grave Accent with number) information from the Excel column B in “Select EDUCATION TOPICS NAME:” field in the VA FileMan inquire path that was identified in the previous step.
- Repeat for the remaining parse data using the “ANOTHER ONE:” field until you’ve entered them all parse data individually.

Example:

```

OUTPUT FROM WHAT FILE: EDUCATION TOPICS//
Select EDUCATION TOPICS NAME: `263 IM-INFORMATION
ANOTHER ONE: `4468 IM-LITERATURE
ANOTHER ONE: `4469 IM-PREVENTION
ANOTHER ONE: `4470 IM-SCHEDULE
ANOTHER ONE: etc
    
```

```

ANOTHER ONE:
STORE THESE ENTRY ID'S IN TEMPLATE:
STANDARD CAPTIONED OUTPUT? Yes// n (No)
FIRST PRINT FIELD: NAME
THEN PRINT FIELD: INACTIVE FLAG
THEN PRINT FIELD:
Heading (S/C): EDUCATION TOPICS LIST Replace
DEVICE:
    
```

Figure 8-5: Select EDUCATION TOPICS NAME example

See example below:

EDUCATION TOPICS LIST	SEP 3,2019 10:32	PAGE 1
NAME	INACTIVE FLAG	

IM-LITERATURE		
M-FOLLOW-UP		
M-LITERATURE		
IM-INFORMATION		
IM-Literature	INACTIVE	
M-INFORMATION		
ASM-Complications	INACTIVE	

Figure 8-6: EDUCATION TOPICS LIST, IM-Literature Inactive

- Figure 8-6 may show inactive that need to be replaced.

- If there are no inactive flags in the list, reviews are done with these steps.
- If there are INACTIVE flags, these will need to be fixed. In Figure 8-7, the INACTIVE flags have been highlighted in red on the excel report that has been filtered in Column C to only show these discrepancy education codes. Recommend to do a special color coding within the excel worksheet to note these flags in some way. An example of this is changing the color of the text.

	A	B	C	D	E
M-FOLLOW-UP		236	AUTTEDT(
M-LITERATURE		4300	AUTTEDT(
M-INFORMATION		4299	AUTTEDT(
ASM-Complications	INACTIVE	1291	AUTTEDT(
IM-LITERATURE		5270	AUTTEDT(
IM-INFORMATION		363	AUTTEDT(
IM-Literature	INACTIVE	364	AUTTEDT(

Figure 8-7: Inactive codes

- Un-filter Column C to view the full report again and look down the list for the inactive education codes highlighted (the text is red in this example).
- When you find the identified INACTIVE Flag education codes, note which Super-Bill picklist it is on, and which CPT code it is associated with so navigating to the Super-Bill component in EHR to fix the code. In Figure 8-8, the Super-Bill picklist namespace GENERAL, the code is 94640, and the education code needing to be replaced is ASM-Complications.

8.4 Reports Example

Education in Associations:

32	FA 36416	36416	ICPT(
33	GENERAL			
34	90658	90658	ICPT(
35	90471	90471	ICPT(
36	94640	94640	ICPT(
37	ASM-Complications	1291	AUTTEDT(
38	PNEUMOCOCCAL	119	AUTTMM(
39	93000	93000	ICPT(
40	94664	94664	ICPT(
41	90743	90743	ICPT(
42	GENERAL CLINIC			
43	G0008	710008	ICPT(
44	GENERAL SUPERBILL			

Figure 8-8: Education in associations, Reports menu example

- The error is in the “GENERAL” Super-Bill picklist, and CPT code of 94640’s association.

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9.0 Super-Bills Current Procedural Terminology (CPT) Picklist Review

The Current Procedural Terminology (CPT®) system, developed by the American Medical Association, provides a standard language and numerical coding methodology to accurately communicate across many stakeholders, including patients, the medical team, diagnostic, and therapeutic services provided by Qualified healthcare professionals. Super-Bills picklists are groupings of common codes (i.e., CPT) that are used by the medical team to document patient encounter-related information efficiently.

9.1 Recommendations

- Review current picklists.
- Collaborate with SMEs to ensure picklists contain appropriate codes.
- Minimize picklists to around 25 entries to avoid ineffective lists that are too long or hard to read.
- Consider editing the CPT narrative to an easy-to-read descriptor.
 - For example, the CPT code 91321 has a default narrative that matches the CPT name of “SARSCOV2 VAC 25 MCG/.25ML IM”. Consider editing this narrative to “Moderna CVX=311; 6M-11Y” so that it is more interpretable to the end-user.
- Consider using filters as part of Super-Bills list set up to show picklist to appropriate users only to cut down on clutter.
- Consider exporting and printing copies of current lists for HIM or Coding review.
- Run reports to identify inactive CPTs currently on picklists so they can be updated/replaced.

9.2 Identified Collaborative Team

- Multidisciplinary team approach in collaboration with HIM and Coding is recommended

9.3 Method

- Exporting From EHR:
 - Periodically, exporting Picklists and sending to HIM and Coding for evaluation and review is best practice:
 - In EHR, navigate to the “Super-Bills” component. Click on the **Super-Bills** button and open.

- Highlight the Super-Bill file wishing to be exported.
- On the Super-bills, select the **Export** button.
- Save in a known location as a text file (.txt) on a PC
- Now this file can be viewed or if on a share drive, HIM and Coding can be shared to evaluate.
- VA FileMan:
 - Run FileMan report to show inactive CPT codes currently on Super-bills.
 - Then use Super-bill picklist component in EHR to replace/update the inactive codes. Work with HIM and Coder SMEs to identify appropriate replacements.
 - Go to VA FileMan-> Print File entries.
 - Consider entering field by field if copy/paste method does not work.
 - FileMan File = BGO CPT PREFERENCES.
 - Copy from the top until the line right above ;999999999.
 - Paste at the "OUTPUT FROM WHAT FILE: //".

```

BGO CPT PREFERENCES
CPT
CPT:
@INACTIVE FLAG'@
FIRST
]

NAME
CPT
CPT
CPT:
INACTIVE FLAG

0;180;99999999999999
    
```

Figure 9-1: BGO CPT PREFERENCES FileMan Print Copy/Paste Entries

- Consider Session logging the information via a telnet client (e.g. SecureCRT, Netterm) or directly printing the information by sending it to an RPMS Printer.

Alternatively, go to FileMan-> Print File entries.

```

OUTPUT FROM WHAT FILE: BGO CPT PREFERENCES// BGO CPT PREFERENCES
                                     (41 entries)
SORT BY: NAME// CPT      (multiple)
CPT SUB-FIELD: CPT:
CPT FIELD: @INACTIVE FLAG'@
    
```

```

START WITH INACTIVE FLAG: FIRST// FIRST
  WITHIN INACTIVE FLAG, SORT BY: ]
  WITHIN INACTIVE FLAG, SORT BY:
STORE IN 'SORT' TEMPLATE: JRL INACT CPT SUPERBILL SORT
                        (Sep 19, 2019@10:26) User #1856 File #90362.31 SORT
DATA ALREADY STORED THERE....OK TO PURGE? NO// YES
DESCRIPTION:
  No existing text
  Edit? NO//
FIRST PRINT FIELD: NAME
THEN PRINT FIELD: CPT (multiple)
  THEN PRINT CPT SUB-FIELD: CPT
  THEN PRINT CPT SUB-FIELD: CPT:
    THEN PRINT CPT FIELD: INACTIVE FLAG
    THEN PRINT CPT FIELD:
  THEN PRINT CPT SUB-FIELD:
THEN PRINT FIELD:
Heading (S/C): BGO CPT PREFERENCES LIST Replace
STORE PRINT LOGIC IN TEMPLATE: JRL INACT CPT SUPER BILL PRINT
                        (Sep 19, 2019@10:26) User #1856 File #90362.31
TEMPLATE ALREADY STORED THERE.... OK TO REPLACE? Y (Yes)
DEVICE: VT Right Margin: 80//
-----
    
```

Figure 9-2: BGO CPT PREFERENCES FileMan Print Entries Detailed Steps

9.4 Report Example

In this example, it is recommended to visit each of the Super-Bills listed and update the inactive CPTs that are identified on the findings report. For example, in collaboration with HIM and Coding SME, site would go to the Super-Bill titled NURSING and replace 90772, J2912, and 90760 with appropriate up-to-date codes.

See example Inactive CPTs in Super-Bills below:

BGO CPT PREFERENCES LIST		AUG 12, 2021	14:47	PAGE 1
NAME	CPT	INACTIVE FLAG		
NURSING	90772	INACTIVE CODE		
	J2912	INACTIVE CODE		
	90760	INACTIVE CODE		
INJECTIONS	J7317	INACTIVE CODE		
	90772	INACTIVE CODE		
	Q0136	INACTIVE CODE		
	90772	INACTIVE CODE		
	J2912	INACTIVE CODE		
	J0540	INACTIVE CODE		
	Q4055	INACTIVE CODE		
URGENT CARE	J1060	INACTIVE CODE		
	J0170	INACTIVE CODE		
	95015	INACTIVE CODE		
GENERAL	97001	INACTIVE CODE		
	90772	INACTIVE CODE		
	11100	INACTIVE CODE		
	11101	INACTIVE CODE		

Figure 9-3: Inactive CPTs in Super-Bills Example

10.0 Current Procedural Terminology (CPT) in Reminders

Clinical Reminders can use CPT codes in their logic to aid in clinical decision support. Codes are often grouped together using Reminder Taxonomies. CPT codes are updated regularly; therefore, the reminder taxonomies that use CPT codes need to be reviewed at regular intervals as well.

10.1 Recommendations

- Collaborate with HIM and SMEs to review Reminder Taxonomies to ensure they contain appropriate codes.

10.2 Identified Collaborative Team

- Clinicians
- Clinical Informaticist
- HIM

10.3 Method

This is a multi-step process. First, inactive CPT codes will be identified. Then, you will use an RPMS menu option to identify which Reminder Taxonomies contain those inactive codes. If inactive codes are found in any Reminder Taxonomies, you will need to review what role that particular taxonomy is fulfilling for the Reminder and what the inactive CPT codes represents.

In some cases, the inactive code should be left in the taxonomy in order to identify that the item the CPT code documents is done. In this case, you may need to add an updated CPT code to the identified taxonomy. In other cases, replace the inactive code with a new code if the identified taxonomy was used to enter data via a reminder dialog for example. The uses of the taxonomies and CPT codes may not be obvious from these reports, and you will need to do some research to really understand how each are used in each Reminder.

Generating a report to review CPT's in reminders:

This is a copy/paste method to generate a report of CPT codes that have been inactivated in the last 800 days.

- Go to FileMan-> Print File entries.
- Copy from the top until the line right above ;999999999.
- Paste at the "OUTPUT FROM WHAT FILE: //"

```

81
@CPT CODE
FIRST
@INACTIVE DATE
T-800
LAST
@INACTIVE FLAG'@
FIRST

NCI INACT CPTS SORT
Y

CPT CODE_"^";X
INACTIVE DATE_"^";X
INACTIVE FLAG_"^";X

NCI INACT CPTS PRINT
Y

;;999999999

```

Figure 10-1: Inactive CPTs FileMan Print Copy/Paste Entries

Consider Session logging the information via a telnet client (e.g. SecureCRT, Netterm) or directly printing the information by sending it to an RPMS Printer.

Alternative method—field by field entry:

- Go to FileMan-> Print File entries.

```

OUTPUT FROM WHAT FILE: BGO CPT PREFERENCES// 81 CPT (26619 entries)
SORT BY: CPT CODE// @CPT CODE
START WITH CPT CODE: FIRST// FIRST
WITHIN CPT CODE, SORT BY: @INACTIVE DATE
START WITH INACTIVE DATE: FIRST// T-800 (JUL 29, 2017)
GO TO INACTIVE DATE: LAST// LAST
WITHIN INACTIVE DATE, SORT BY: @INACTIVE FLAG'@
START WITH INACTIVE FLAG: FIRST// FIRST
WITHIN INACTIVE FLAG, SORT BY:
STORE IN 'SORT' TEMPLATE: NCI INACT CPTS SORT
(Sep 19, 2019@10:31) User #1856 File #81 SORT
DATA ALREADY STORED THERE....OK TO PURGE? NO// YES
DESCRIPTION:
No existing text
Edit? NO//
SHOULD TEMPLATE USER BE ASKED 'FROM'-'TO' RANGE FOR 'INACTIVE DATE'? NO//
FIRST PRINT FIELD: CPT CODE_"^";X
THEN PRINT FIELD: INACTIVE DATE_"^";X
THEN PRINT FIELD: INACTIVE FLAG_"^";X
THEN PRINT FIELD:
Heading (S/C): CPT LIST//
STORE PRINT LOGIC IN TEMPLATE: NCI INACT CPTS PRINT
(Sep 19, 2019@10:31) User #1856 File #81
TEMPLATE ALREADY STORED THERE.... OK TO REPLACE? Y (Yes)
START AT PAGE: 1//

```

DEVICE:

Figure 10-2: Inactive CPTs FileMan Print Entries Detailed Steps

- Session log this report.
- Clean report by removing blank lines and headers.
- Import into Excel and delimitate by “^”.
 - Open Excel then go to data tab.
 - Select from text/CSV.
 - Select your file.
 - Import file.
 - Delimiter-custom “^”.
 - Data Type Detection: select based on entire dataset.
 - Load.
- Copy the first Excel column “A”. These are your CPT codes to be searched in next step.

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An example of the resulting Excel report listing all the inactive CPT codes. The CPT codes are in column A:

	A	B	C	D
1	10022	JAN 1,2019	INACTIVE CODE	
2	11100	JAN 1,2019	INACTIVE CODE	
3	11101	JAN 1,2019	INACTIVE CODE	
4	15732	JAN 1,2018	INACTIVE CODE	
5	20005	JAN 1,2019	INACTIVE CODE	
6	27370	JAN 1,2019	INACTIVE CODE	
7	29582	JAN 1,2018	INACTIVE CODE	
8	29583	JAN 1,2018	INACTIVE CODE	
9	31320	JAN 1,2018	INACTIVE CODE	
10	31595	JAN 1,2019	INACTIVE CODE	
11	33282	JAN 1,2019	INACTIVE CODE	
12	33284	JAN 1,2019	INACTIVE CODE	
13	34800	JAN 1,2018	INACTIVE CODE	
14	34802	JAN 1,2018	INACTIVE CODE	
15	34803	JAN 1,2018	INACTIVE CODE	
16	34804	JAN 1,2018	INACTIVE CODE	
17	34805	JAN 1,2018	INACTIVE CODE	
18	34806	JAN 1,2018	INACTIVE CODE	
19	34825	JAN 1,2018	INACTIVE CODE	
20	34826	JAN 1,2018	INACTIVE CODE	
21	34900	JAN 1,2018	INACTIVE CODE	
22	36120	JAN 1,2018	INACTIVE CODE	
23	36515	JAN 1,2018	INACTIVE CODE	
24	41500	JAN 1,2019	INACTIVE CODE	
25	43760	JAN 1,2019	INACTIVE CODE	
26	46762	JAN 1,2019	INACTIVE CODE	
27	50395	JAN 1,2019	INACTIVE CODE	
28	55450	JAN 1,2018	INACTIVE CODE	

Figure 10-3: Excel report of inactive CPT codes

- Check to see if any of these inactive codes are in any Reminder Taxonomies.
 - Navigate to Reminder Taxonomy Management.
- **PATH:**
 - EHR MENU-> Reminder Managers Menu-> Reminder Taxonomy Management
 - Select **Code Search**.

- Start a new telnet session log. At “INPUT A CODE SEARCH FOR:” Paste the information from Column A in the Excel document (these are the inactive CPT codes).
- Stop logging the session.
- Review session log report.

Example of the information generated from the Code Search menu option:

```

Input a code to search for: C9748
Searching for HCPCS code C9748
C9748 is not used in any taxonomies.

Input a code to search for: C9750
Searching for HCPCS code C9750
C9750 is not used in any taxonomies.

Input a code to search for: G0202
Searching for HCPCS code G0202
HCPCS G0202 is used in the following taxonomies:
IHS-MAMMOGRAM
IHS-MAMMOGRAM 2007

Input a code to search for: G0204
Searching for HCPCS code G0204
HCPCS G0204 is used in the following taxonomies:
IHS-MAMMOGRAM
IHS-MAMMOGRAM 2007

Input a code to search for: G0206
Searching for HCPCS code G0206
HCPCS G0206 is used in the following taxonomies:
IHS-MAMMOGRAM
IHS-MAMMOGRAM 2007

Input a code to search for: G0364
Searching for HCPCS code G0364
G0364 is not used in any taxonomies.

Input a code to search for: G0502
Searching for HCPCS code G0502
G0502 is not used in any taxonomies.

Input a code to search for: G0503
Searching for HCPCS code G0503
G0503 is not used in any taxonomies.

Input a code to search for: G0504
    
```

Figure 10-4: Code Search menu option, information generated

Note: This is where it is not obvious what needs to be done with these results. In this example, you would need to understand what G0206 code is for, why it was inactivated (was it updated to a new code?), and what purpose the IHS-MAMMOGRAM and IHS-MAMMOGRAM 2007 taxonomies are serving in your Reminders. This report does not show you which Reminder the taxonomy is used in.

11.0 Quick Orders Review:

Quick orders aid in computerized provider order entry for labs, radiology, pharmacy, etc.

- Quick orders must be created and maintained locally for each RPMS database.
- Obsolete or poorly designed quick orders can clutter the orders tab, cause frustration, and lead to errors.

11.1 Recommendations

- Review a set of randomly selected quick orders to ensure they are operating correctly.
- Review a set of randomly selected finished orders to ensure they are appropriate and accurate.
- Generate reports to determine if orders are being completed/finished appropriately (this may not apply to all types of orders).

11.2 Identified Collaborative Team

- Package Owner(s)
- Specialty Informatics and/or Department affected.

11.3 Method

The primary method to review quick orders is to randomly pick and test quick orders from various menus. For all types of orders, ensure the quick order:

- Does not trigger any error messages.
- Appropriately launches an order dialog box for the item described in the Quick order name.

Items to focus on for different kinds of orders:

- Nursing: Does it have a start and stop date field available? Is the field defaulted or required?
- Pharmacy: Are all the fields highlighted with selections, or does the user have to select/re-select any of the fields before accepting the order?
- Laboratory: Is the lab name within the ordering dialog appropriate? Does it start with ZZ? There are some FileMan report options that can help identify some issues as well.

The following report will list quick orders that are using a lab test name that starts with ZZ. Typically, the ZZ in front of a lab test name indicates the test is inactive and a new test is now in use. However, this report will not tell you which menu the quick order identified is on. It is possible the quick order has been removed from the menus. Use the “search/replace” function on the “menu management” menu in RPMS to find out if the quick order is still hung on an active menu.

Alternatively, for the below report:

- Go to FileMan-> Print File entries.
- Copy from the top until the line right above ;9999999999.
- Paste at the “OUTPUT FROM WHAT FILE: //”.
- Laboratory:

```
ORDER DIALOG
@NAME

@PACKAGE
LAB
LAB Z
DISABLE
@
@
RESPONSES
@VALUE["ZZ"

NCI LAB ZZ ORDER REVIEW SORT
Y

NAME;L50
DISABLE;L50

LAB ZZ ORDERS
NCI LAB ZZ ORDER REVIEW PRINT
Y

;;999999999999
```

Figure 11-1: Laboratory Quick Orders FileMan Print Copy/Paste Entries

Alternative option:

- Go to FileMan-> Print File entries.

```
OUTPUT FROM WHAT FILE: ORDER DIALOG// ORDER DIALOG (1366 entries)
SORT BY: NAME// @NAME
START WITH NAME: FIRST//
WITHIN NAME, SORT BY: @PACKAGE
START WITH PACKAGE: FIRST// LAB
GO TO PACKAGE: LAST// LAB Z
WITHIN PACKAGE, SORT BY: DISABLE
START WITH DISABLE: FIRST// @
```

```

GO TO DISABLE: LAST// @
  WITHIN DISABLE, SORT BY: RESPONSES      (multiple)
  RESPONSES SUB-FIELD: @VALUE["ZZ"
    WITHIN VALUE["ZZ", SORT BY:
STORE IN 'SORT' TEMPLATE: NCI LAB ZZ ORDER REVIEW SORT
  Are you adding 'JRL LAB ZZ ORDER REVIEW SORT' as
    a new SORT TEMPLATE? No// Y (Yes)
DESCRIPTION:
  No existing text
  Edit? NO//
SHOULD TEMPLATE USER BE ASKED 'FROM'-'TO' RANGE FOR 'PACKAGE'? NO//
SHOULD TEMPLATE USER BE ASKED 'FROM'-'TO' RANGE FOR 'DISABLE'? NO//
FIRST PRINT FIELD: NAME;L50
THEN PRINT FIELD: DISABLE;L50
THEN PRINT FIELD:
Heading (S/C): ORDER DIALOG LIST// LAB ZZ ORDERS
STORE PRINT LOGIC IN TEMPLATE: NCI LAB ZZ ORDER REVIEW PRINT
                                (Oct 07, 2019@13:11) User #1856 File #101.41
TEMPLATE ALREADY STORED THERE.... OK TO REPLACE? Y (Yes)
START AT PAGE: 1//
DEVICE:

```

Figure 11-2: Laboratory Quick Orders FileMan Print Entries Detailed Steps

This following report will identify active Nursing orders, the patient they are for, and their start dates.

This information can be used to see if there are particular orders that are always active—it could be that the quick order does not have a stop date option in it. In general, there should not be many orders on this list. If the list is very long and/or has old dates listed, you may need to do some research to find out why these orders are still active.

Nursing Review:

```

ORDER
1
PACKAGE
1
ORDER ENTRY/RESULTS REPORTING
ORDER ENTRY/RESULTS REPORTING
TO
NURSING
NURSING
STATUS
ACTIVE
ACTIVE

OBJECT OF ORDER
START DATE
STATUS
TO

0;300;999999999
    
```

Figure 11-3: Nursing Quick Orders FileMan Print Copy/Paste Entries

Alternative Option:

- Go to FileMan-> Print.

```

OUTPUT FROM WHAT FILE: CLINICAL REMINDER PARAMETERS// ORDER
 1  ORDER (405755 entries)
 2  ORDER ACKNOWLEDGEMENT (0 entries)
 3  ORDER CHECK COMPILER FUNCTIONS (58 entries)
 4  ORDER CHECK DATA CONTEXT (7 entries)
 5  ORDER CHECK DATA FIELD (162 entries)
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1 ORDER (405755 entries)
SORT BY: NUMBER// PACKAGE
 1  PACKAGE
 2  PACKAGE REFERENCE
CHOOSE 1-2: 1 PACKAGE
START WITH PACKAGE: FIRST// ORDER ENTRY/RESULTS REPORTING
GO TO PACKAGE: LAST// ORDER ENTRY/RESULTS REPORTING
  WITHIN PACKAGE, SORT BY: TO
  START WITH TO: FIRST// NURSING
GO TO TO: LAST// NURSING
  WITHIN TO, SORT BY: STATUS
  START WITH STATUS: FIRST// ACTIVE
  GO TO STATUS: LAST// ACTIVE
  WITHIN STATUS, SORT BY:
STORE IN 'SORT' TEMPLATE:
FIRST PRINT FIELD: OBJECT OF ORDER
THEN PRINT FIELD: START DATE
THEN PRINT FIELD: STATUS
THEN PRINT FIELD: TO
THEN PRINT FIELD:
Heading (S/C): ORDER LIST//
    
```

```
START AT PAGE: 1//
DEVICE: 0;300;999999999 VT
```

Figure 11-4: Nursing Quick Orders FileMan Print Entries Detailed Steps

If there are orders still active, you will need to review the quick orders and address staff training.

Consider Session logging the information via a telnet client (e.g. SecureCRT, Netterm) or directly printing the information by sending it to an RPMS Printer.

11.4 Report Example

Below is an example report from the nursing example provided.

ORDER LIST		AUG 16, 2021	14:20	PAGE 1
OBJECT OF ORDER	START DATE	STATUS		TO

PACKAGE: ORDER ENTRY/RESULTS REPORTING				
XXXXXXXXXXXXXXXXXXXXX	DEC 27, 2006	10:03	ACTIVE	
NURSING				
XXXXXXXXXXXXXXXXXXXXX.	JAN 4, 2007	10:02	ACTIVE	
NURSING				
XXXXXXXXXXXXXXXXXXXXX	JAN 24, 2007	09:26	ACTIVE	
NURSING				
XXXXXXXXXXXXXXXXXXXXX	FEB 13, 2007	11:31	ACTIVE	
NURSING				
XXXXXXXXXXXXXXXXXXXXX	FEB 21, 2007	08:31	ACTIVE	
NURSING				
XXXXXXXXXXXXXXXXXXXXX	MAR 8, 2007	09:16	ACTIVE	
NURSING				
XXXXXXXXXXXXXXXXXXXXX	MAR 28, 2007	11:25	ACTIVE	
NURSING				
XXXXXXXXXXXXXXXXXXXXX	APR 4, 2007	09:06	ACTIVE	
NURSING				

Figure 11-5: Nursing Quick Order Report

12.0 Integrated Problem List (IPL) Picklist Review

- IPL picklists are groupings of SNOMED CT ® codes used by clinicians to document encounter-related information efficiently.

12.1 Recommendations

- Review to ensure picklists contain appropriate codes.
- Keep picklists to around 25 entries to ensure usability.
- Consider using filters as part of Picklist setup to show picklist to appropriate users only.

12.2 Identified Collaborative Team

- Multidisciplinary team that uses the picklist in collaboration with HIM and Coding.

12.3 Method

Export each picklist you would like to review, save or print and send to identified team for review.

- Export picklists by going to the RPMS EHR, Integrated Problem list, and select **Picklists** button.
- Select **Manage Picklist**.
- Select **Picklist** to Export and then select the **Export** button.

For more information on picklist management, please see *Clinical Informatics Webinar Series: Fundamentals and Skills*.

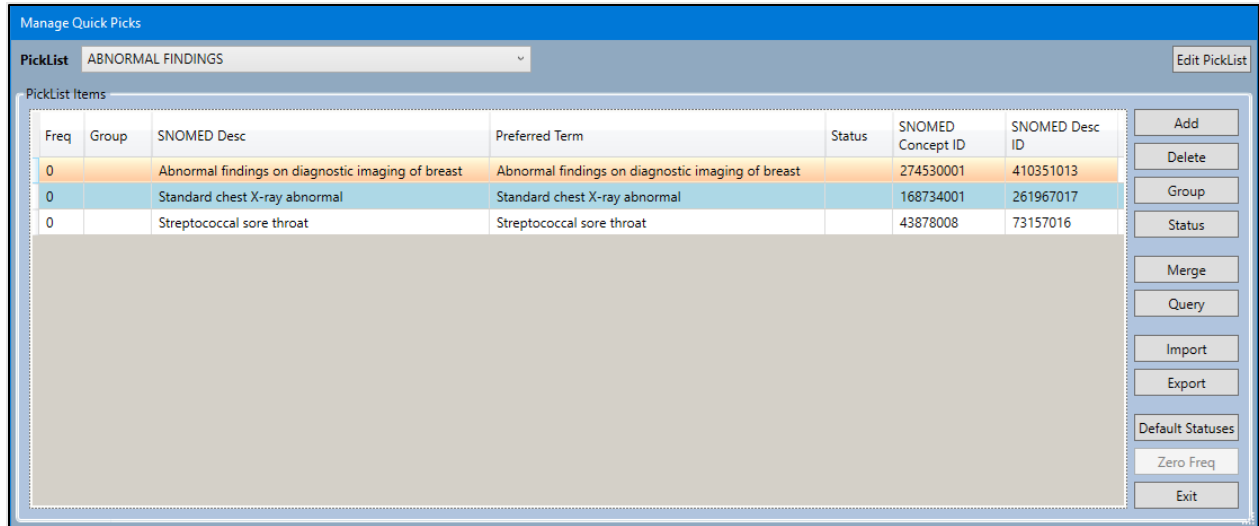


Figure 12-1: Abnormal Findings

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13.0 TIU Template Review

TIU Templates are tools to assist in the documentation of an encounter in the form of a note.

13.1 Recommendation

TIU templates should be approved before use by the Health Information Management Committee (HIMC) and it is recommended to review them yearly:

- Create Committee (HIMC) or Forms Committee if not in place.
- Review current or future templates within this body.
- Record approval in HIMC meeting Minutes.
- Modifying Templates to Include Approval Information.
- Export all TIU templates and retain copies outside of the RPMS EHR.

13.2 Identified Collaborative Team

- HIM in collaboration with Forms Committee.

13.3 Method

- Manually Review TIU Templates and determine last approval date.

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14.0 Teams List Review

- Team Lists are a functionality within RPMS that allow groups of individuals receive various flags or consult notifications.

14.1 Recommendations

- Clinical staff and Informatics should collaborate to determine which individuals should be included on a team list.

14.2 Identified Collaborative Team

- Department Supervisor
- Clinical Informaticist

14.3 Method

- The following FileMan report will show all of the team lists in your system and who is assigned to each team. However, it will not tell you how this list is used by RPMS. You will need to research and understand why and how the list is used so that the appropriate people can be assigned. Some lists may not currently be in use. Team lists are often used in Consult set up as well as in Notifications set up.

Team List:

- Go to VA FileMan-> Print File entries.
- FileMan File = OE/RR LIST.
- Double-click the table below to bring up Excel then Copy from the top until the line right above ;999999999.

Note: The exact amount of 9's can vary; this format keeps you from having to hit "return" at every page. So if you have a small report, 2-3 is fine, a big report 5-7 may be needed.

- Paste at the "OUTPUT FROM WHAT FILE: //".

```
OE/RR LIST
@NAME
FIRST
]

NCI OE/RR LIST SORT
Y

"Name:  "_NAME;R1
AUTOLINK
"AUTOLINK:  "_AUTOLINK;R2;C5
```

```
"DEVICE:  "_DEVICE;R3;C5
USER
"USER:  "_USER;R4;C10

" ";S
]

NCI OE/RR LIST PRINT
Y

;;9999999999
```

Figure 14-1: Team List FileMan Print Copy/Paste Entries

Consider Session logging the information via a telnet client (e.g. SecureCRT, Netterm) or directly printing the information by sending it to an RPMS Printer.

Alternatively:

- Go to VA FileMan-> Print File entries.

```
OUTPUT FROM WHAT FILE: CPT// OE/RR LIST      (23 entries)
SORT BY: NAME// NAME
START WITH NAME: FIRST// FIRST
  WITHIN NAME, SORT BY: ]
  WITHIN NAME, SORT BY:
STORE IN 'SORT' TEMPLATE: NCI OE/RR LIST SORT
                        (Sep 19, 2019@11:56) User #1856 File #100.21  SORT

DATA ALREADY STORED THERE....OK TO PURGE? NO// YES
DESCRIPTION:
  No existing text
  Edit? NO//
FIRST PRINT FIELD: NAME
THEN PRINT FIELD: USER      (multiple)
  THEN PRINT USER SUB-FIELD: USER
  THEN PRINT USER SUB-FIELD:
THEN PRINT FIELD: " ";S
THEN PRINT FIELD: ]
Heading (S/C): OE/RR LIST LIST//
STORE PRINT LOGIC IN TEMPLATE: NCI OE/RR LIST PRINT
                        (Sep 19, 2019@11:56) User #1856 File #100.21
TEMPLATE ALREADY STORED THERE.... OK TO REPLACE? Y (Yes)

DEVICE:  0;300;9999999999
-----
```

Figure 14-2: Team List FileMan Print Entries Detailed Steps

14.4 Report Example

```
TEAM List

NAME                                USER
-----
BEHAVIORAL HEALTH
```

DENTAL CONSULT	Retired
DIABETES	Active user 1 Active user 2
FITNESS	
JIWC	Retired
JVN	Retired

Figure 14-3: Report example with the TEAM List

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15.0 Consult Review

Consult/Request Tracking package (Consults) creates an efficient mechanism for clinicians to order consults. Hospital services can then track the progress of consults from the point of receipt through its final resolution. This allows proof of management as required by CMS.

15.1 Identified Collaborative Team

- Consult Service Team (or Department Supervisor affected)
- HIM
- Clinical Informatics

15.2 Recommendations

- HIM and consult service teams or departments should review consult orders and ensure patient care needs have been met.
- Informatics and consult service teams should review consult set up periodically to ensure it is up to date with appropriate users receiving the information as needed.
- Review that staff consult training is completed and conduct follow-up assessment periodically.
- Review Pending consults to determine if management of consults process is appropriate.
- Utilize Teams instead of individual users in consult set up whenever possible to avoid problems or bottlenecks related to a single user.

15.3 Method

To review pending consults:

- Run Pending Consults reports periodically using the Consult Tracking Reports menu options.

To review consult set up, there are 2 options:

- Option 1: Review consults set up individually
 - EHR-Consult Management-Service User Management. Enter individual consult name and review fields.
- Option 2: Review all system consults through a VA FileMan report—see below.
 - Go to VA FileMan-> Print File entries.
 - FileMan File = Request Services.

- Copy from the top until the line right above 0;300;9999999999.
- Paste at the “OUTPUT FROM WHAT FILE: //”.

```

REQUEST SERVICES
@SERVICE NAME
FIRST
@SERVICE USAGE
@
@

NCI CONSULTS SETUP REVIEW SORT
Y

"SERVICE NAME: "_SERVICE NAME;C1;R1
"PRINTER:"_SERVICE PRINTER;C80;R1
SERVICE TEAM(S) TO NOTIFY
"NOTIFICATION TEAM: "_SERVICE TEAM TO NOTIFY;C5;R2

UPDATE TEAMS W/O NOTIFICATIONS
"UPDATE TEAM: "_UPDATE TEAMS W/O NOTIFICATIONS;C5;R3
Y

ADMINISTRATIVE UPDATE TEAMS
"ADMINISTRATIVE TEAM: "_ADMINISTRATIVE UPDATE TEAM;C5;R4

"***SERVICE INDIVIDUAL TO NOTIFY: "_SERVICE INDIVIDUAL TO NOTIFY;C5;R5
UPDATE USERS W/O NOTIFICATIONS
"***UPDATE USERS: "_UPDATE USERS W/O NOTIFICATIONS;C5;R6
YES

UPDATE USER CLASSES W/O NOTIFS
"UPDATE USER CLASSES: "_UPDATE USER CLASS W/O NOTIFS;C5;R7
YES

ADMINISTRATIVE UPDATE USERS
"***ADMINISTRATIVE UPDATE USERS: "_ADMINISTRATIVE UPDATE USER;C5;R8

" ";C5;R5

NCI CONSULT REVIEW PRINT
Y

;300;99999999999999
    
```

Figure 15-1: All Consults FileMan Print Copy/Paste Entries

Consider Session logging the information via a telnet client (e.g. SecureCRT, Netterm) or directly printing the information by sending it to an RPMS Printer.

Alternate option:

- Go to VA FileMan-> Print File entries:

```

OUTPUT FROM WHAT FILE: REQUEST SERVICES// REQUEST SERVICES
SORT BY: SERVICE NAME// @SERVICE NAME
START WITH SERVICE NAME: FIRST// FIRST
    
```

```

WITHIN SERVICE NAME, SORT BY: @SERVICE USAGE
START WITH SERVICE USAGE: FIRST// @
GO TO SERVICE USAGE: LAST// @
  WITHIN SERVICE USAGE, SORT BY:
STORE IN 'SORT' TEMPLATE: NCI CONSULTS SETUP REVIEW SORT
                               (Oct 29, 2019@12:43) User #1856 File #123.5 SORT
DATA ALREADY STORED THERE....OK TO PURGE? NO// YES
DESCRIPTION:
  No existing text
  Edit? NO//
SHOULD TEMPLATE USER BE ASKED 'FROM'-'TO' RANGE FOR 'SERVICE USAGE'? NO//
FIRST PRINT FIELD: "SERVICE NAME: " _SERVICE NAME;C1;R1
THEN PRINT FIELD: "PRINTER:" _SERVICE PRINTER;C80;R1
THEN PRINT FIELD: SERVICE TEAM(S) TO NOTIFY (multiple)
  THEN PRINT SERVICE TEAM(S) TO NOTIFY SUB-FIELD: "NOTIFICATION TEAM: " _SERVICE TEAM
TO NOTIFY;C5;R2
  THEN PRINT SERVICE TEAM(S) TO NOTIFY SUB-FIELD:
THEN PRINT FIELD: UPDATE TEAMS W/O NOTIFICATIONS (multiple)
  THEN PRINT UPDATE TEAMS W/O NOTIFICATIONS SUB-FIELD: "UPDATE TEAM: " _UPDATE TEAMS
W/O NOTIFICATIONS;C5;R3
  By 'UPDATE TEAMS W', do you mean UPDATE TEAMS W/O NOTIFICATIONS 'UPDATE TEAMS
W/O NOTIFICATIONS'? Yes// Y (Yes)
  THEN PRINT UPDATE TEAMS W/O NOTIFICATIONS SUB-FIELD:
THEN PRINT FIELD: ADMINISTRATIVE UPDATE TEAMS (multiple)
  THEN PRINT ADMINISTRATIVE UPDATE TEAMS SUB-FIELD: "ADMINISTRATIVE TEAM:
" _ADMINISTRATIVE UPDATE TEAM;C5;R4
  THEN PRINT ADMINISTRATIVE UPDATE TEAMS SUB-FIELD:
THEN PRINT FIELD: "***SERVICE INDIVIDUAL TO NOTIFY: " _SERVICE INDIVIDUAL TO
NOTIFY;C5;R5
THEN PRINT FIELD: UPDATE USERS W/O NOTIFICATIONS (multiple)
  THEN PRINT UPDATE USERS W/O NOTIFICATIONS SUB-FIELD: "***UPDATE USERS: " _UPDATE
USERS W/O NOTIFICATIONS;C5;R6
  By 'UPDATE USERS W', do you mean UPDATE USERS W/O NOTIFICATIONS 'UPDATE USERS
W/O NOTIFICATIONS'? Yes// YES (Yes)
  THEN PRINT UPDATE USERS W/O NOTIFICATIONS SUB-FIELD:
THEN PRINT FIELD: UPDATE USER CLASSES W/O NOTIFS (multiple)
  THEN PRINT UPDATE USER CLASSES W/O NOTIFS SUB-FIELD: "UPDATE USER CLASSES:
" _UPDATE USER CLASS W/O NOTIFS;C5;R7
  By 'UPDATE USER CLASS W', do you mean UPDATE USER CLASSES W/O NOTIFS 'UPDATE
USER CLASS W/O NOTIFS'? Yes// YES (Yes)
  THEN PRINT UPDATE USER CLASSES W/O NOTIFS SUB-FIELD:
THEN PRINT FIELD: ADMINISTRATIVE UPDATE USERS (multiple)
  THEN PRINT ADMINISTRATIVE UPDATE USERS SUB-FIELD: "***ADMINISTRATIVE UPDATE USERS:
" _ADMINISTRATIVE UPDATE USER;C5;R8
  THEN PRINT ADMINISTRATIVE UPDATE USERS SUB-FIELD:
THEN PRINT FIELD: " ";C5;R5
THEN PRINT FIELD:
Heading (S/C): REQUEST SERVICES LIST Replace
STORE PRINT LOGIC IN TEMPLATE: NCI CONSULT REVIEW PRINT
                               (Oct 29, 2019@12:43) User #1856 File #123.5
TEMPLATE ALREADY STORED THERE.... OK TO REPLACE? Y (Yes)

START AT PAGE: 1//
DEVICE: 0;300;99999 VT

```

Figure 15-2: All Consults FileMan Print Entries Detailed Steps

15.4 Report Example–Consult Setup

Below is an example Consult Setup Report.

```

Consult Setup
REQUEST SERVICES LIST                AUG 17, 2021  09:18  PAGE 1
-----
SERVICE NAME: ALL SERVI
PRINTER:
  **SERVICE INDIVIDUAL TO NOTIFY:

SERVICE NAME: AUDIOLOGY                PRINTER: REUSE THIS ENTRY
  ADMINISTRATIVE TEAM: SPECIAL UPDATE TEAM
  **SERVICE INDIVIDUAL TO NOTIFY: Retired
  **ADMINISTRATIVE UPDATE USERS: Retired

SERVICE NAME: BEHAVIORAL HEALTH
PRINTER:
  NOTIFICATION TEAM: Empty Team
  ADMINISTRATIVE TEAM: Empty Team
  **SERVICE INDIVIDUAL TO NOTIFY:
    
```

Figure 15-3: Consult Setup Report example

15.5 Report Example-Pending Consult

Below is an example Pending Consult report. This is using the Service Consult Pending Resolution menu option. Must be done for each consults service individually.

```

To Service: DIABETES MANAGEMENT
From: ALL      To: SEP 12, 2023
Status        Last Action      Request Date  Patient Name  Pt Location
              Consult/Request By Status
              FROM: ALL    TO: SEP 12,2023

              GROUPER: ANDERSON DIABETES MANAGEMENT

SERVICE: ANDERSON DIABETES MANAGEMENT
Pending      CPRS RELEASED ORDER 06/02/22 patient name (MRN)      A CLINIC
Pending      CPRS RELEASED ORDER 06/02/22 patient name (MRN)      A CLINIC
Total Requests Pending:                                2
Total Requests Pending Resolution:
    
```

Figure 15-4: Pending Consult example

16.0 CIANB Resources Setup and Review

- CIANB Resources are used in EHR for retrieving information from RPMS.
- Each user, patient and EHR instance creates a job.
- Each job process requires a resource, and the resources assign slots for the different jobs.
- The maximum number per device and slots is 40.
- Ensure your resources have been built first and server can handle the load. Higher values will increase server load but improve application response to asynchronous remote procedure calls and host-signaled events.

16.1 Recommendations

- Incorporate into a monitoring process.
- Review for optimization.

16.2 Identified Collaborative Team

- RPMS Administrator or Area RPMS Support.
- Clinical Informaticist

16.3 Methods

- Inquire to FileMan File “Resources”—you can never have more resources than what is listed here.
- Menu Path: CORE (IHS CORE)—EHR (RPMS-EHR CONFIGURATION MASTER MENU)—FRM (VUECENTRIC FRAMEWORK CONFIGURATION)—SITE PARAMETER EDIT.

16.4 Report Example

Resource File:

```

OUTPUT FROM WHAT FILE: PCC MASTER CONTROL// RESOURCE
Select RESOURCE NAME: ?
Answer with RESOURCE NAME
Do you want the entire 33-Entry RESOURCE List? Y (Yes)
Choose from:
CIANB THREAD RESOURCE #1
CIANB THREAD RESOURCE #10
CIANB THREAD RESOURCE #11
CIANB THREAD RESOURCE #12
CIANB THREAD RESOURCE #13
CIANB THREAD RESOURCE #14
CIANB THREAD RESOURCE #15
  
```

```
CIANB THREAD RESOURCE #16
CIANB THREAD RESOURCE #17
CIANB THREAD RESOURCE #18
CIANB THREAD RESOURCE #19
CIANB THREAD RESOURCE #2
CIANB THREAD RESOURCE #20
CIANB THREAD RESOURCE #3
CIANB THREAD RESOURCE #4
CIANB THREAD RESOURCE #5
CIANB THREAD RESOURCE #6
CIANB THREAD RESOURCE #7
CIANB THREAD RESOURCE #8
CIANB THREAD RESOURCE #9
CIA RPC Broker Site Parameters for System: PHXFTDRPMSA.D1.NA.IHS.GOV
-----
Host polling interval                               5
Maximum number of resource devices                 20
Number of resource slots to allocate               20
Authentication method          FDH,FDH            Normal
```

Figure 16-1: Resource File Report example

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17.0 Error Trap Review

- The Error Trap is the location where errors in the system are sent for review and troubleshooting.

17.1 Recommendations

- Should be reviewed daily as part of the RPMS Administrator's checklist.
- A member of the HIT team (often the RPMS Administrator) should review daily.

17.2 Identified Collaborative Team

- RPMS Administrator
- Area RPMS Support
- Clinical Informaticist for any error impacting operations

17.3 Methods

Review the Error Trap Display:

- Operations Management-> Error Trap Display.

17.4 Report Example

In response to the DATE prompt, you can enter:

- 'S' to specify text to be matched in error or routine name.
- No error logged on 9/9/2021.
- Which date? >.

18.0 Parameter Setup Review

- Parameters govern how the RPMS EHR system behaves—such as visit ranges, lab ranges, etc.
- A yearly review should be conducted to ensure there were no unintentional changes and to verify settings are optimized.
- Various errors can degrade EHR performance (e.g., search ranges greater than one year).

18.1 Recommendations

- Informatics should engage local end-users and review current settings focusing on Search Length related values.

18.2 Identified Collaborative Team

- Clinical Informaticist
- Multidisciplinary leadership team related to associated parameter

18.3 Method

- EHR MAIN MENU-> General Parameter Tools.
- Go into General Parameters and List Entity for the System, and Users and compare to recommendations.

References:

- Go to RPMS Recording and Materials Library.
- Conduct a search using keyword “parameter” and search all 3 categories.
- <https://www.ihs.gov/rpms/training/recording-and-material-library/?&CFID=34583722&CFTOKEN=17788076>

18.4 Report Example

Below is an example of the report using List Values for a Selected Entity.

Note: It is recommended to be very selective about TIU Personal Template access. The “FULL ACCESS” value shown below is not recommended.

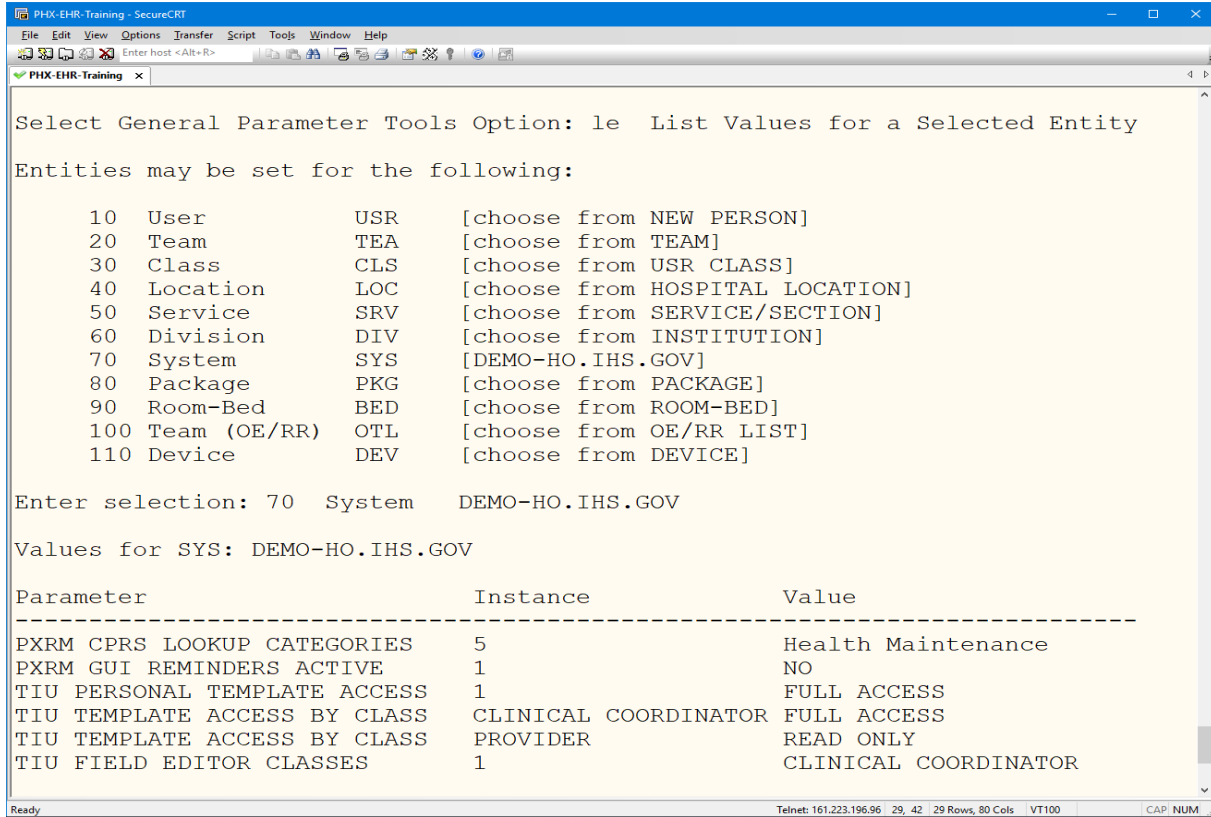


Figure 18-1: Example Report for List Values for a Selected Entity.

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19.0 TaskMan Review

TaskMan is an RPMS feature that organizes and schedules various functions and/or reports in RPMS (e.g., iCare, notifications).

19.1 Recommendation

Local SMEs need to review and evaluate TaskMan setup with guidance from Area/National Consultants.

19.2 Identified Collaborative Team

- RPMS Administrator
- Area RPMS Support
- Clinical Informaticists for tasks related to clinical operations

19.3 Method

References:

- RPMS Admin Technical Documents TaskMan:
<https://www.ihs.gov/rpms/training/course-materials/?parent=RPMS+Admin+Technical+Documents&fld=Taskman>
- TaskMan Systems and Application Tasks Recorded Training.
 - Go to RPMS Recording and Materials Library.
 - Conduct a search:
 - <https://www.ihs.gov/rpms/training/recording-and-material-library/?&CFID=34583722&CFTOKEN=17788076>

Review Unsuccessful Tasks:

- TaskMan Management-> List Tasks -> Unsuccessful Tasks.
- Provide report to SME.

Review Scheduled Tasks and compare to recommendations (only consider tasks for packages you use).

Scheduled TaskMan Report:

- Go to VA FileMan-> Print File entries.
 - FileMan file = OPTION SCHEDULING.
 - Copy from the top until the line right above 0;300;999999999.
 - Paste at the “OUTPUT FROM WHAT FILE: //”Placeholder.

OPTION SCHEDULING

```

@.01
FIRST
]

NCI OPTION SCHEDULING SORT
Y

NAME_ "^";X
QUEUED TO RUN AT WHAT TIME_ "^";X
QUEUED TO RUN ON VOLUME SET_ "^";X
RESCHEDULING FREQUENCY_ "^";X
SPECIAL QUEUEING_ "^";X
DEVICE FOR QUEUED JOB OUTPUT_ "^";X

NCI OPTIONS SCHEDULING PRINT
Y

;300;99999999

```

Figure 19-1: Option Scheduling FileMan Print Copy/Paste Entries

Consider Session logging the information via a telnet client (e.g. SecureCRT, Netterm) or directly printing the information by sending it to an RPMS Printer.

Alternative option:

- Go to FileMan-> Print File entries.

```

OUTPUT FROM WHAT FILE: OE/RR LIST// OPTION SCHEDULING
                                     (45 entries)

SORT BY: NUMBER// @.01  NAME
START WITH NAME: FIRST// FIRST
  WITHIN NAME, SORT BY: ]
  WITHIN NAME, SORT BY:
STORE IN 'SORT' TEMPLATE: NCI OPTION SCHEDULING SORT
                                     (Sep 19, 2019@12:07) User #1856 File #19.2

SORT

DATA ALREADY STORED THERE....OK TO PURGE? NO// YES
DESCRIPTION:
  No existing text
  Edit? NO//
FIRST PRINT FIELD: NAME_ "^";X
THEN PRINT FIELD: QUEUED TO RUN AT WHAT TIME_ "^";X
THEN PRINT FIELD: QUEUED TO RUN ON VOLUME SET_ "^";X
THEN PRINT FIELD: RESCHEDULING FREQUENCY_ "^";X
THEN PRINT FIELD: SPECIAL QUEUEING_ "^";X
THEN PRINT FIELD: DEVICE FOR QUEUED JOB OUTPUT_ "^";X
THEN PRINT FIELD:
Heading (S/C): OPTION SCHEDULING LIST  Replace
STORE PRINT LOGIC IN TEMPLATE: NCI OPTIONS SCHEDULING PRINT
                                     (Sep 19, 2019@12:07) User #1856 File #19.2
TEMPLATE ALREADY STORED THERE.... OK TO REPLACE? Y  (Yes)

```

DEVICE: VT Right Margin: 80//

Figure 19-2: Option Scheduling FileMan Print Entries Detailed Steps

Note: Vista Imaging sites should consider these TaskMan Tasks with the following settings.

- HL AUTOSTART LINK MANAGER–startup persistent.
- XWB LISTENER STARTER–startup persistent.
- XWB M2M CACHE LISTENER–startup persistent.
- BADE TSK HLO IB FILER–running.

19.4 Report Example

A screenshot of the Taskman report example is pictured below. To view full excel file, log in to prompt on the RPMS Recording and Material Library.

Taskman	Schedule	vol	frequency	special	Notes:	IT Review
ABMD TSK VISIT CHECK	AUG 17, 2021@12:00	FDH	1D			
ACHSTX DCIS/WEB FRS	SEP 1, 2021@20:00	FDH	1M(1,15)			
ADSLICRPT	AUG 17, 2021@22:00		1D		missing volume set	
ADSSITEEXPORT	AUG 17, 2021@22:00		1D		missing volume set	
AGMP A08 BCKGRND UPDATE TSK	AUG 17, 2021@11:35	FDH	60S	STARTUP	FREQUENCY 300S AND STARTUP	
AGMP ACK BCKGRND TSK	AUG 17, 2021@11:37	FDH	300S			
AGMP MPI MISSING ICN TSK	AUG 17, 2021@23:00	FDH	1D	STARTUP	"Startup" SHOULD NOT BE USE	
AGMP MPI PURGE HLO MSGS	AUG 21, 2021@08:00	FDH	7D			
APCD EPISODIC CLEANUP	AUG 18, 2021@19:05		14D		volume set is missing.	

Figure 19-3: TaskMan Report Example

20.0 Monthly Data Export Review

These are surveillance exports facilities send out to report data to Headquarters(HQ).

20.1 Recommendations

- Identify Owners of the exports and work with Area SMEs to configure, correct, establish, or re-connect as needed.
- RPMS Administrators monitor this on a daily or weekly basis.

20.2 Identified Collaborative Team

- Individually Identified SME
 - Epidemiologists
 - Behavioral Health
 - HIM
 - Pharmacy
 - Quality Department
 - Immunization Coordinator
- RPMS Administrator

20.3 Method

For exports, look at the Pub folder to ensure the files are being saved appropriately.

- Data Warehouse exports
 - Search export/pub folder for any file ending in “.BDW”, “.BDWH”, and “.WT” monthly
 - TaskMan-BDW QUEUE GDW
 - Should run monthly.
 - TaskMan-BDWH QUEUE PRESCRIPTION EXPORT
 - Should run monthly.
 - TaskMan-BZX5RP30 WAIT TIMES REP AUTO
 - Should run weekly.
 - Discuss with SME if they receive an e-mail when export is received and another e-mail when it is processed by HQ.
 - To receive an e-mail you need to send a request to: NDW-ACKREPLY@ihs.gov.

- Epi center–Flu Export-
 - Search export/pub for a file with “FLU_XXXXXXXXXXXX.txt” monthly.
 - Epidemiology Information TaskMan–APCL SURVEILLANCE ILI TEMPLATE Run Daily.
 - Review if SME is getting e-mail confirmation.
 - Discuss with local SME if they get email reports.
 - Request for e-mail if you would like to ILI report you can provide directly to the state for ILINet reporting purposes, to:HQ_OPHS_Disease_Surveillance@ihs.gov.
- Epi center–CANES Export (Community Alerts National Export Surveillance)-
 - Epidemiology Information TaskMan –BQI NIGHTLY BACKGROU ND run daily.
 - Review if SME is getting e-mail confirmation.
 - Discuss with local SME if they get email reports.
 - Request for e-mail if you would like to ILI report you can provide directly to the state for ILINet reporting purposes, to:
HQ_OPHS_Disease_Surveillance@ihs.gov.
- Behavior Health Export-BHSXXXXXXXX.
 - Review Export/pub folder for any file with BHSXXXXXXXX.
 - Review TaskMan AMH EXPORT QUEUE EXPORT is running Monthly.
 - Discuss with SME if they are monitoring the export via the website.
 - Verify export occurred via this website:
<https://www.ihs.gov/NonMedicalPrograms/ihpes/index.cfm?module=ihpes&option=bhindex>
- CHR-Community Health Representative System Export [BCHMENU].
 - Can be tasked or manual task option–BCH Export Generate TXS.
 - Manual–Menu Option.
 - GEN-Generate CHR Transaction for HQ.
 - Run Display a Log Entry option.
 - Displays number of records processed and exported.
 - List any errors in transmission.
 - Display if the transmission was successful.
- CCDA Exports–CCDA Menu [BCCD MENU].
 - Manage CCDA transmissions.
 - Explain how to look for errors
 - What to do if you notice errors (open ticket)

- View and Purge Error Documents(*only purge at the direction of tier 2 or tier3 support*).
- PDMP Exports–see BPDM MENU.
 - Create Export File of Prescriptions using Create Export File of Prescriptions [BPDM EXPORT TRANSACTIONS]
 - Can be setup via ONE of the following TaskMan task (*do not use both*)
 - BPDM QUEUE PDM EXPORT
 - BPDM QUEUE PDM EXPORT ALL
 - Ensure appropriate staff are set up to monitor the mailman messages created from these exports
 - Identify this mailgroup by a FileMan inquire into PDM SITE PARAMETERS
 - Review the mailgroup assignments by viewing the mailgroup in mailman group/distribution management menu (i.e. View user names assigned to that group)
 - Review the Drug Monitoring Export Log Report and site parameters to ensure the frequency, format, and contact information is correct and meets your state’s requirements
- BYIM Export–see Section 25.0 for more information.

Note: Don’t assume that if there is a file in the PUB that it was sent. Confirmation by emails is the true confirmation.

20.4 Reports

Generate CHR Transaction for HQ.

```

PHX-EHR-Training - SecureCRT
File Edit View Options Transfer Script Tools Window Help
Enter host <Alt-R>
PHX-EHR-Training x
Select Export Utility Menu Option: GEN  Generate CHR Transactions for HQ
This routine will generate CHR records to be sent to HQ.
The data transmitted will include everything entered since the last time
data was exported up until yesterday.
You may "" out at any prompt and will be
ask to confirm your entries prior to generating transactions.

Last run was for NOV 5,2005 through DEC 4,2005.

The inclusive dates for this run are DEC 5,2005 through SEP 8,2021.
The location for this run is CIHA HOSPITAL.

Do you want to continue? N//
Ready                               Telnet: 161.223.196.96 15, 30 15 Rows, 80 Cols VT100 CAP NUM
  
```

Figure 20-1: Select Export Utility Menu Option

- Manage CCDA transmissions.

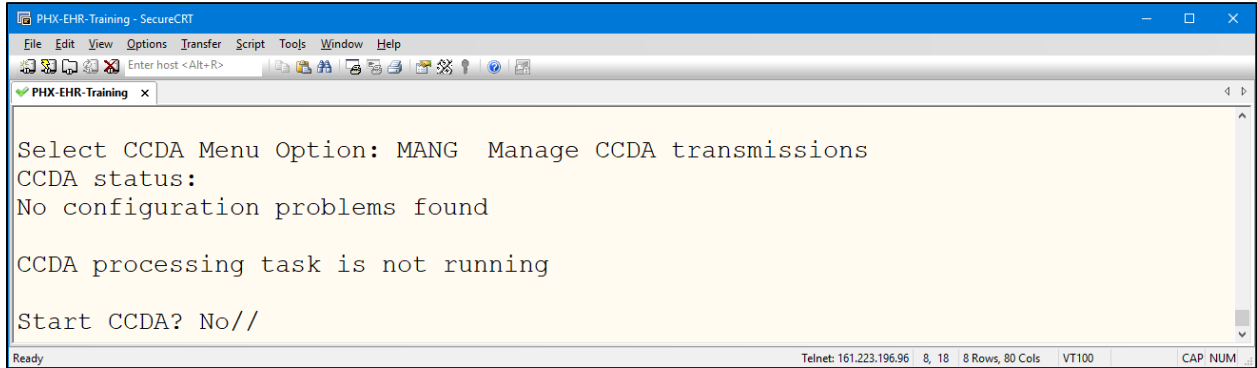


Figure 20-2: Manage CCDA Transmissions

- View and Purge Error Documents.

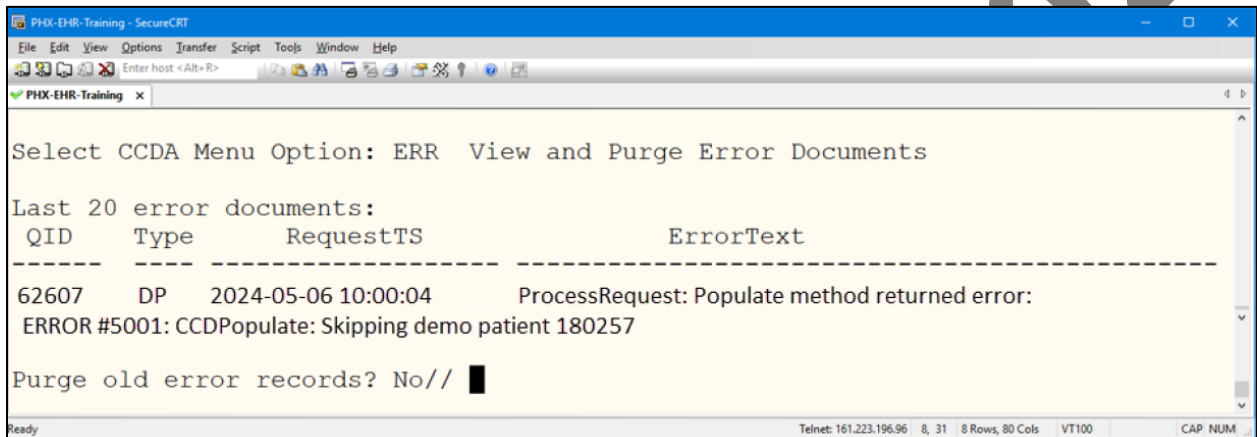
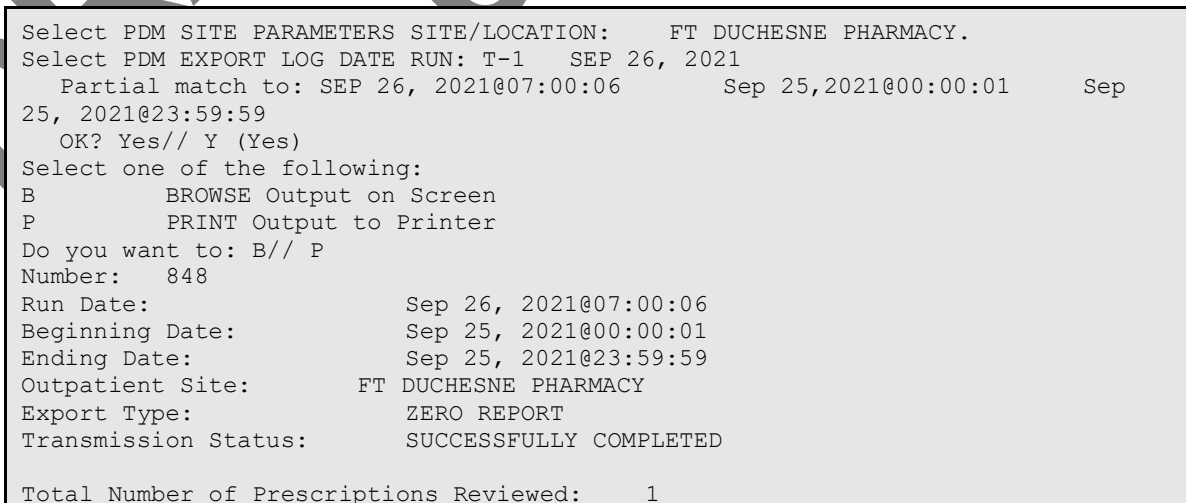


Figure 20-3: View and Purge Error Documents Example

Display Controlled Prescription Drug Monitoring Export Log Entry.



Number of Prescriptions Exported:	0
Export Filename:	4607860_092621_848.txt
File Type:	PRODUCTION

Figure 20-4: Export Log Entry example

- BYIM Interface Menu.

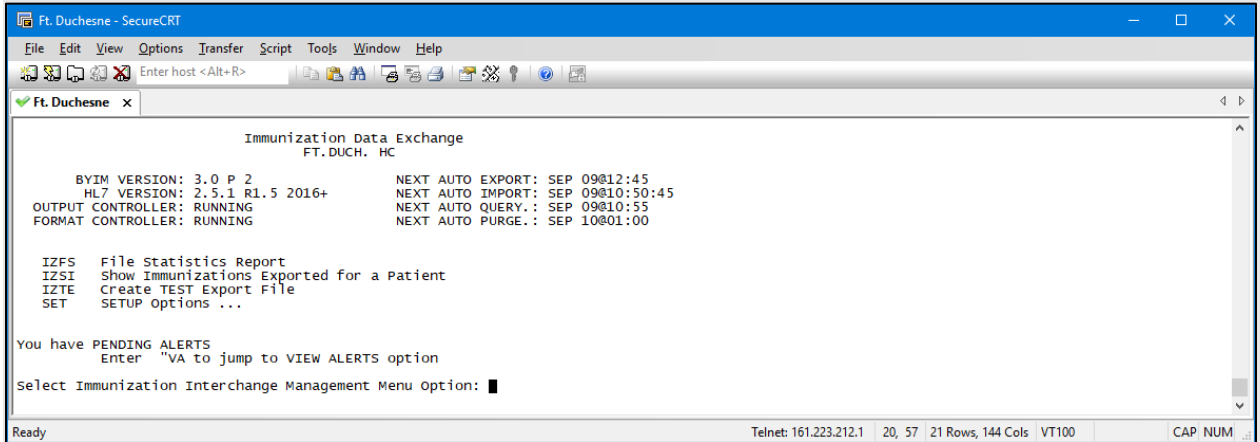


Figure 20-5: BYIM Interface menu–Immunization Data Exchange Example

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21.0 Order Checks and Local Terms Review

Order checks and Local terms are used by the system to trigger clinical decision support during the ordering process (e.g., Serum Creatinine, WBC, Prothrombin time).

21.1 Recommendations

- Order Checks should be reviewed yearly by a multidisciplinary group.
- Package Owners should work with the HIT Team and populates local terms in real-time.

21.2 Identified Collaborative Team

- Order Checks–Multidisciplinary team in collaboration with Informatics.
- Local Terms–Laboratory in collaboration with Informatics.

21.3 Method

Run a report showing current order checks that are enabled or disabled at the system level.

- CORE-> EHR RPMS-EHR CONFIGURATION MASTER MENU-> ORD ORDER ENTRY CONFIGURATION-> OCX ORDER CHECK CONFIGURATION-> PAR ORDER CHECK PARAMETERS.
- Enable/Disable an Order Check–here you can view at various system levels – use a ? to see current settings.
- Edit Local Terms – use this menu option to view each local term and what is assigned to each term.

21.4 Report Examples

Enable/Disable an Order check.

Order Check -----	Value -----
ESTIMATED CREATININE CLEARANCE	Enabled
ORDER CHECKING NOT AVAILABLE	Enabled
ALLERGY-DRUG INTERACTION	Enabled
ALLERGY-CONTRAST MEDIA INTERACTION	Enabled
CT and MRI PHYSICAL LIMITATIONS	Enabled
BIOCHEM ABNORMALITY FOR CONTRAST MEDIA	Enabled
DUPLICATE ORDER	Enabled
RECENT BARIUM STUDY	Disabled
RECENT ORAL CHOLECYSTOGRAM	Enabled
DUPLICATE DRUG ORDER	Enabled
Local Site Terms for Order Checks example:	

```
National Term: SERUM CREATININE  
Translated from file: 'LABORATORY TEST' 60  
CREATININE [UO] (173)  
xCREATININE SER/PLAS 1014 (9999269)  
National Term: SERUM UREA NITROGEN  
Translated from file: 'LABORATORY TEST' 60  
UREA NITROGEN [UO] (174)
```

Figure 21-1: Enable/Disable an Order check example

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22.0 Health Information Management (HIM) Review

HIM will monitor note status regularly to identify unsigned, un-cosigned or missing notes and then work with providers to address any issues.

22.1 Recommendations

- HIM preforms reviews to identifies any issues or concerns and will address with medical staff.
- HIM can work with an Area HIM consultant to review common maintenance processes to ensure policies and procedures are in place.

22.2 Identified Collaborative Team

- HIM
- Medical Staff
- Clinical Informaticist
- Area HIM Consultant (as needed)

22.3 Method

Review Report available to HIM for monitoring documentation.

- CORE-> RPMS-EHR Configuration Master Menu-> TIU Configuration-> TIU Menu for Medical Records.
- Review unsigned additional signatures.
- Unsigned/Uncosigned Report.

22.4 Reports

The below screenshots are examples of the TIU reports outlined above.

Unsigned additional signer:

Totals for Service	AMBULATORY CARE:	440
Totals for Service	DENTAL:	1
Totals for Service	MEDICAL RECORDS:	6
Totals for Service	PHARMACY:	22
Totals for Service	PURCHASE REFERRED CARE:	1
Totals for Service	UNKNOWN:	1
Totals for Division	FT.DUCH. HC:	471
Totals for all Divisions:		471

Figure 22-1: Unsigned additional signer report example

Unsigned/uncosigned:

Totals for Service: AMBULATORY CARE---	UNSIGNED: 53	UNCOSIGNED:	0
Totals for Service: BUSINESS OFFICE---	UNSIGNED: 1	UNCOSIGNED:	0
Totals for Service: DENTAL---	UNSIGNED: 7	UNCOSIGNED:	0
Totals for Service: IRM---	UNSIGNED: 1	UNCOSIGNED:	0
Totals for Service: PHARMACY---	UNSIGNED: 12	UNCOSIGNED:	0
Totals for Service: PURCHASE REFERRED CARE---	UNSIGNED: 1	UNCOSIGNED:	0
Totals for Division: XXXXXXXXX---	UNSIGNED: 75	UNCOSIGNED:	0

Figure 22-2: Unsigned/signed report example

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23.0 Note Title Review

- *Identifies* different types of notes that have been used in patient charts.
- *Reviewed* yearly.
- *Inactive Note* Titles as needed to keep available note title list as efficient as possible.

23.1 Recommendations

- A review should be conducted by HIM or SME and unused note titles inactivated.

23.2 Identified Collaborative Team

- HIM
- Clinical Informaticist
- Other SMEs as appropriate
- Area HIM Consultant or Area Clinical Informaticist (as needed)

23.3 Method

Run the “active title clean up report” and provide it to HIMC to determine if any note titles should be inactivated.

- CORE-> EHR (RPMS-EHR CONFIGURATION MASTER MENU)-> TIU (TIU CONFIGURATION)-> HIS (TIU MENU FOR MEDICAL RECORDS)-> TMM-> (TIU MAINTENANCE MENU)-> CLN (ACTIVE TITLE CLEANUP REPORT).

Note: If you run this report ensure you don't accidentally inactivate note titles.

Report Example

```

# of Used Titles      :      62
# of Unused Titles   :      109
# of Invalid Titles   :         0
-----
# of Total Titles    :      171

# of Docs             :      36094
# of Docs Incorrect .01 Field :      0
# of Docs Zero/Null .01 Field :      0
-----
# of Total Docs Searched :      36094

Current User:  LESTER, JOHN PHARMD
Current Date:  Aug 18, 2021@10:46:39
Date range searched: Aug 18, 2020 - Aug 18, 2021
    
```

Document Title	# of Docs	Last DT Used	Author/Dictator
ALLERGY	0	N/A	N/A
ANNOTATION	0	Sep 17, 2010	xxxxxxxxxxxxxxxx
AUDIOLOGY CONSULT	0	N/A	N/A
BEHAVIORAL HEALTH CONSULT	0	May 18, 2016	xxxxxxxxxxxxxxxx
CARDIOLOGY CONSULT	0	N/A	N/A
CHR CARE PLAN	0	N/A	N/A
COORDINATION OF CARE	0	Jul 11, 2018	xxxxxxxxxxxxxxxx
CRITICAL RESULT	0	Apr 29, 2020	xxxxxxxxxxxxxxxx

Figure 23-1: Title Clean Up Report Example

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24.0 Immunization Package Review

This package helps monitor the facilities immunization system to ensure that:

- *Current* vaccine products are active and available.
- *NDCs* with lot and expiration dates are accurate.
- *Other* information is updated (i.e., default dose, immunization letters, Vaccine Information Sheets (VIS), etc.).

24.1 Recommendations

Ownership needs to be clarified, vaccine table updated in real time to current inventory and information.

Note: VIS sheets need to be updated within six months of the CDC providing updated versions.

Review site parameters to align with clinical decisions at individual clinics and hospitals.

24.2 Identified Collaborative Team:

- Nursing
- Pharmacy
- Immunization Coordinator/Immunization Package Owner

24.3 Method

CORE-> Immunization Menu -> Manager Menu.

Review Immunization Package and:

- Inactivate Lots no longer in supply.
- Inactivate Lots that are expired.
- Review Vaccine Tables and Optimize.
 - NDC Number.
 - Lot Number.
 - CVX: Caution: Ensure vaccines are properly mapped to the correct CVX Full Vaccine Name. If mapped incorrectly, the TIU Dialog will not work correctly.
 - Status.
 - Manufacture.

24.4 Report Example

Immunization Lot Table

EDIT LOT NUMBER TABLE
 (Listed by Unused Doses)

#	Lot Number	Vaccine	Status	Exp Date	Start Unused	Facility
1	acd4567890.....	FLU-RIV4....	Active.....		100..	99.....
2	p12345.....	COVID,Pfr...	Active..	01/01/30..	1000..	999.....
3	FE3592.....	COVID,Pfr...	Active..	11/21.....	1195..	1195.....
4	FE3593.....	COVID,Pfr...	Active..	11/21/21..	1195..	1195.....
5	M4567.....	COVID,Mod...	Active..	01/01/30..	10000..	9998.....
6	UE066AA.....	ACTHIB.....	Active.....			
7	UE548AA.....	ACTHIB.....	Active.....			
8	UE711AA.....	ACTHIB.....	Active.....			
9	UE767AA.....	ACTHIB.....	Active.....			
10	ue548aa.....	ACTHIB.....	Active.....			
11	111111.....	COVID,Jsn...	Active.....			

+ 162 Lots: Scroll down to view more, or type ??.

A Add a Lot Number	E Edit a Lot Number	D Display Inactives Yes/No
C Change List Order	S Search List	I Inactivate Old Lots
		H Help

Select Action: Quit// █

Ready Telnet: 161.223.196.96 21, 23 21 Rows, 80 Cols VT100 CAP NUM

Figure 24-2: Lot Table Example

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Immunization Vaccine Table:

EDIT VACCINE TABLE

#	Vaccine	CVX	Active	Lot# Dflt	VIS Dflt	Vol Dflt	Forecast
1	ACTHIB.....	(48)	Active.....		10/30/19..	0.5 ml	...YES
2	ADENO,oral..	(143)	Inactive.....		01/08/20..		...NO
3	ADENOV,NOS..	(82)	Inactive.....			0.5 ml	...NO
4	ADENOVI,T4..	(54)	Inactive.....			0.5 ml	...NO
5	ADENOVI,T7..	(55)	Inactive.....			0.5 ml	...NO
6	ANTHRAX.....	(24)	Inactive.....		01/08/20..	0.5 ml	...NO
7	Anthrax IG..	(181)	Inactive.....				...NO
8	AS03,ajv....	(801)	Inactive.....				...NO
9	BCG.....	(19)	Inactive.....			0.5 ml	...NO
10	BOTULINUM...	(27)	Inactive.....			0.5 ml	...NO
11	Cholera LA..	(174)	Inactive.....		10/30/19..		...NO
12	CholeraBWC..	(173)	Inactive.....				...NO
13	CholeraNOS..	(26)	Inactive.....			0.5 ml	...NO

+ Scroll down to view more. Type ?? for more actions

E Edit Vaccine C Change List Order H Help
 F Forecasting P Print List

Select Action: Quit// █

Figure 24-3: Vaccine Table, EDIT VACCINE TABLE Example

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Immunization Site Parameters:

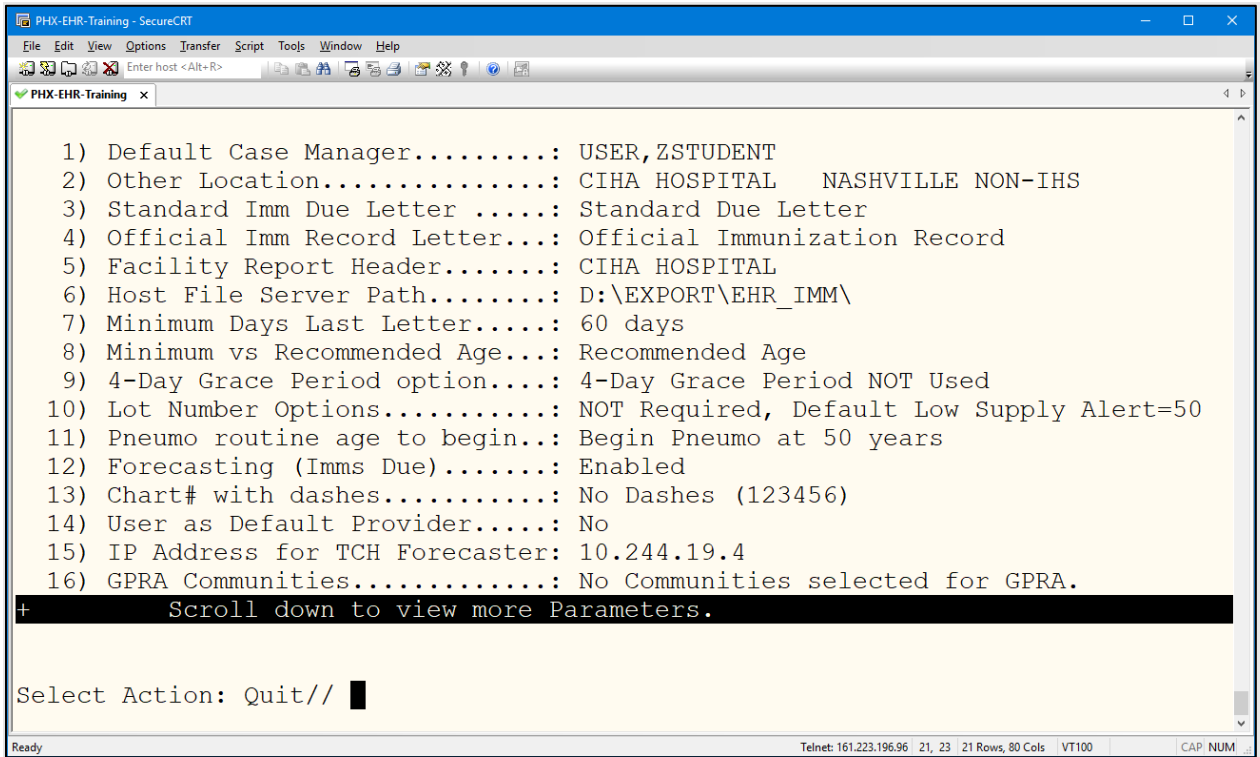


Figure 24-4: Site Parameters

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25.0 Immunization Interface Management (BYIM)

Bi-Directional interface that allows IHS sites to send Evaluation Immunization and Forecast Requests and receive back the immunization history that is stored at the state and state's recommended forecast.

Management is required to ensure that the messages are being sent, received and errors are reviewed for corrective action.

25.1 Recommendation

- Ownership clarified
- Transmissions monitored
- Errors clinically reviewed and corrected
- Training applied where identified

25.2 Identified Collaborative Team

- Clinical Informaticist
- RPMS Administrator
- Nursing
- Immunization Coordinator

25.3 Method

- Utilize BYIM package to monitor interface and troubleshoot as needed. Work with State Immunization Exchanges to identify errors in transmissions as well.
 - Display ERRORS from State Response [BYIM IZ ERROR REPORT]
 - Add/Review RWT Reports [BYIM IZ RWT FILES]

26.0 Clinical Reminders Review

- Clinical Decision Support tool providing reminders to clinicians for when clinical interventions are needed to meet clinical guidelines or best practices.
- Improves documentation and follow-up.
- Allows viewing of when certain actions related to patient care were performed.
- Helps tracking and documenting of when care has been or needs to be delivered.

26.1 Recommendation

- Clean-up and ensure there is a copy of all exchange reminders.
- Evaluate for new applicable guidelines.

26.2 Identified Collaborative Team

- Clinical Informaticist
- Multidisciplinary team with SMEs for particular reminders
- Area HIM Consultant or Area Clinical informaticist (as needed)

26.3 Method

- Discuss the last time reminders were updated and if greater than 3 years old consider full evaluation.
- Provide list of current reminders on the coversheet. Ask for needed updates.
- Review Reminder Coversheet and compare with Reminder Exchange.
- Discuss with the multidisciplinary team and ensure reminders have superusers or owners.

27.0 Notifications and Alerts Settings Review

Notifications are a tool for providers to help alert them of clinically relevant information and to facilitate action when needed on that information. It is recommended to have a policy in place to govern when such notifications should be reviewed and if appropriate acted upon. RPMS has parameters that help to govern activities surrounding the behavior of the notifications. The parameters ensure standardization for the system, availability of the most relevant alerts within the notification component, decreases confusion, and increases appropriate use for patient safety and documentation purposes.

27.1 Recommendations

- Implement or review the policy and procedure for notifications.
- Review RPMS notification parameters to ensure alignment with the Notification policy and procedure. Consider some notifications for a longer duration e.g., lab, imaging.

27.2 Identified Collaborative Team

- Clinical Informatics
- Health Information Management
- Medical Staff
- RPMS Administrator
- Area Clinical Informaticist (as needed)

27.3 Method and Report Example

1. Review the purging interval by using the parameter called ORB ARCHIVE PERIOD, List Values for a Selected Parameter under General Parameter Tool. Review the setting and discuss with your team to ensure it aligns with business needs. Example of how to review the setting shown below. This will show you the listing at all levels.

```
Select CPRS Manager Menu Option: ^XX   General Parameter Tools
LV   List Values for a Selected Parameter
LE   List Values for a Selected Entity
LP   List Values for a Selected Package
LT   List Values for a Selected Template
EP   Edit Parameter Values
ET   Edit Parameter Values with Template
EK   Edit Parameter Definition Keyword
BXPA Parameter Audit System Menu
Select General Parameter Tools Option: LV List Values for a Selected Parameter.
Select PARAMETER DEFINITION NAME: ORB ARCHIVE PERIOD Grace Period Before Deletion.
Values for ORB ARCHIVE PERIOD
Parameter                               Instance                               Value
```

```

-----
PKG: ORDER ENTRY/RESULTS REPOR LAB RESULTS                27375
PKG: ORDER ENTRY/RESULTS REPOR ORDER REQUIRES CHART      30
PKG: ORDER ENTRY/RESULTS REPOR FLAG ORDER FOR CLARI     30
PKG: ORDER ENTRY/RESULTS REPOR ORDER REQUIRES ELEC      27375
PKG: ORDER ENTRY/RESULTS REPOR ABNORMAL LAB RESULTS      30
PKG: ORDER ENTRY/RESULTS REPOR ADMISSION                30
PKG: ORDER ENTRY/RESULTS REPOR UNSCHEDULED VISIT        30
PKG: ORDER ENTRY/RESULTS REPOR DECEASED PATIENT        30
PKG: ORDER ENTRY/RESULTS REPOR IMAGING PATIENT EXAM     30
PKG: ORDER ENTRY/RESULTS REPOR IMAGING RESULTS          27375
PKG: ORDER ENTRY/RESULTS REPOR CONSULT/REQUEST RESO    27375
PKG: ORDER ENTRY/RESULTS REPOR CRITICAL LAB RESULT      27375
PKG: ORDER ENTRY/RESULTS REPOR ABNORMAL IMAGING RES     30
PKG: ORDER ENTRY/RESULTS REPOR IMAGING REQUEST CANC     30
PKG: ORDER ENTRY/RESULTS REPOR NEW SERVICE CONSULT/    27375
PKG: ORDER ENTRY/RESULTS REPOR SERVICE ORDER REQ CH    30
PKG: ORDER ENTRY/RESULTS REPOR CONSULT/REQUEST CANC     30
PKG: ORDER ENTRY/RESULTS REPOR NPO DIET MORE THAN 7    30
PKG: ORDER ENTRY/RESULTS REPOR FLAGGED OI RESULTS -     30
    
```

Figure 27-1: Review of settings in Notification Purge Interval Parameter Example

2. Navigate to Enabled/Disabled Notifications (parameter name = ORB PROCESSING FLAG) parameter by using the List Values for a Selected Parameter under General Parameter Tool. Review the setting and discuss with your team to ensure it aligns with business needs. Example of how to review the setting shown below. This will show you the listing at all levels. This includes users and will provide a long list. Session logging the output will allow you to easily review and search.

```

Select CPRS Manager Menu Option: ^XX  General Parameter Tools
LV  List Values for a Selected Parameter
LE  List Values for a Selected Entity
LP  List Values for a Selected Package
LT  List Values for a Selected Template
EP  Edit Parameter Values
ET  Edit Parameter Values with Template
EK  Edit Parameter Definition Keyword
BXPA Parameter Audit System Menu ...
Select General Parameter Tools Option: LV  List Values for a Selected Parameter.
Select PARAMETER DEFINITION NAME: ORB PROCESSING FLAG Processing Flag.
Values for ORB PROCESSING FLAG
Parameter                               Instance                               Value
-----
USR: DOE,JOHN                           FLAG ORDER FOR CLARI                Disabled
USR: DOE,JOHN                           ABNORMAL LAB RESULTS                Disabled
USR: DOE,JOHN                           ADMISSION                          Disabled
USR: DOE,JOHN                           UNSCHEDULED VISIT                   Disabled
USR: DOE,JOHN                           DECEASED PATIENT                    Disabled
USR: DOE,JOHN                           IMAGING PATIENT EXAM                Disabled
USR: DOE,JOHN                           IMAGING RESULTS                      Disabled
USR: DOE,JOHN                           CONSULT/REQUEST RESO                Disabled
USR: DOE,JOHN                           CRITICAL LAB RESULT                 Disabled
USR: DOE,JOHN                           IMAGING REQUEST CANC                Disabled
USR: DOE,JOHN                           SERVICE ORDER REQ CH                Disabled
USR: DOE,JOHN                           CONSULT/REQUEST CANC                Disabled
USR: DOE,JOHN                           NPO DIET MORE THAN 7                Disabled
USR: DOE,JOHN                           FLAGGED OI RESULTS                  Disabled
USR: DOE,JOHN                           ORDERER-FLAGGED RESU                Disabled
    
```

USR: DOE, JOHN	DISCHARGE	Disabled
USR: DOE, JOHN	TRANSFER FROM PSYCHI	Disabled
USR: DOE, JOHN	ORDER REQUIRES CO-SI	Disabled
USR: DOE, JOHN	FLAGGED OI ORDER - I	Disabled

Figure 27-2: Review of settings in Enabled/Disabled Notifications Example

3. Navigate to TaskMan Management then Schedule/Unschedule Options. Review XQALERT DELETE OLD. See example below.

```

Select Systems Manager Menu Option: TaskMan Management.
  Schedule/Unschedule Options
  One-time Option Queue
  TaskMan Management Utilities ...
  List Tasks
  Dequeue Tasks
  Requeue Tasks
  Delete Tasks
  Print Options that are Scheduled to run
  Cleanup Task List
  Print Options Recommended for Queueing
Select TaskMan Management Option: schedule/Unschedule Options.
Select OPTION to schedule or reschedule: XQALERT DELETE OLD      Delete Old (>1 4
d) Alerts
  ...OK? Yes//      (Yes)
Menu Text: Delete Old (>14 d) Alerts      TASK ID: 8627387

-----
  QUEUED TO RUN AT WHAT TIME: SEP 9,2023@04:00
  DEVICE FOR QUEUED JOB OUTPUT:
  QUEUED TO RUN ON VOLUME SET: OCAT
  RESCHEDULING FREQUENCY: 1D
  TASK PARAMETERS: 365
  SPECIAL QUEUEING:

-----
Exit      Save      Next Page      Refresh
Enter a command or '^' followed by a caption to jump to a specific field.
COMMAND: E      Press <PF1>H for help      Insert
Select OPTION to schedule or reschedule:
Menu Text: Delete Old (>14 d) Alerts      TASK ID: 8627387

-----
  QUEUED TO RUN AT WHAT TIME: SEP 9,2023@04:00
  DEVICE FOR QUEUED JOB OUTPUT:
  QUEUED TO RUN ON VOLUME SET: OCAT
  RESCHEDULING FREQUENCY: 1D
  TASK PARAMETERS: 365
  SPECIAL QUEUEING:

-----
Exit      Save      Next Page      Refresh.
Enter a command or '^' followed by a caption to jump to a specific field.
COMMAND: E      Press <PF1>H for help      Insert
Select OPTION to schedule or reschedule:
    
```

Figure 27-3: TaskMan Management, XQALERT DELETE OLD Example

28.0 Taxonomy Management Review

Taxonomies are groups of related items such as medications, lab tests, or diagnoses. Taxonomies are used by various RPMS reporting applications and clinical decision support tools. Site-populated taxonomies are used by facilities to identify their locally created items that fit the criteria. The identified subject matter expert at the facility needs to add in the appropriate data elements (i.e., meds, labs) for reports to run correctly. This will need to be completed routinely such as when new data elements are created or post-patch installation.

- Groups of related items such as medications, lab tests, or diagnoses.
- Used by RPMS reporting applications and clinical decision support (CDS) tools.
- Site-populated taxonomies are used by sites to identify their locally created items that fit criteria.
- Patch installation or updates, requires sites to update data elements (i.e., meds, labs) for reports to run correctly.

RPMS reporting applications and CDS Tools using Site-Populated Taxonomies:

- Clinical Reporting System (CRS)
- Government Performance and Results Act (GPRA)
- Diabetes Management System (BDM)
- iCare(BQI)
- Visit General Retrieval (VGEN)
- Q-Man (PCC Query Utility)
- Uniform Data System (UDS)
- EHR Clinical Reminders (PXR)

28.1 Recommendations

- Identify subject matter experts/package owners responsible for taxonomy maintenance.
- Set-up a maintenance schedule to ensure the taxonomies are routinely managed.
- Ensure that adding to appropriate taxonomy is a standard step in the process when creating a new data element such as a lab test or a medication.

28.2 Identified Collaborative Team

- Pharmacy Informaticist/Package owner
- Laboratory Informaticists/Package owner

- Clinical Informaticist
- Area HIM Consultant or Area Clinical Informaticist (as needed)

28.3 Method

iCare is the simplest location to manage taxonomies.

1. Log into iCare and Navigate to Tools-> Taxonomy Maintenance-> Use Filter on edit option.

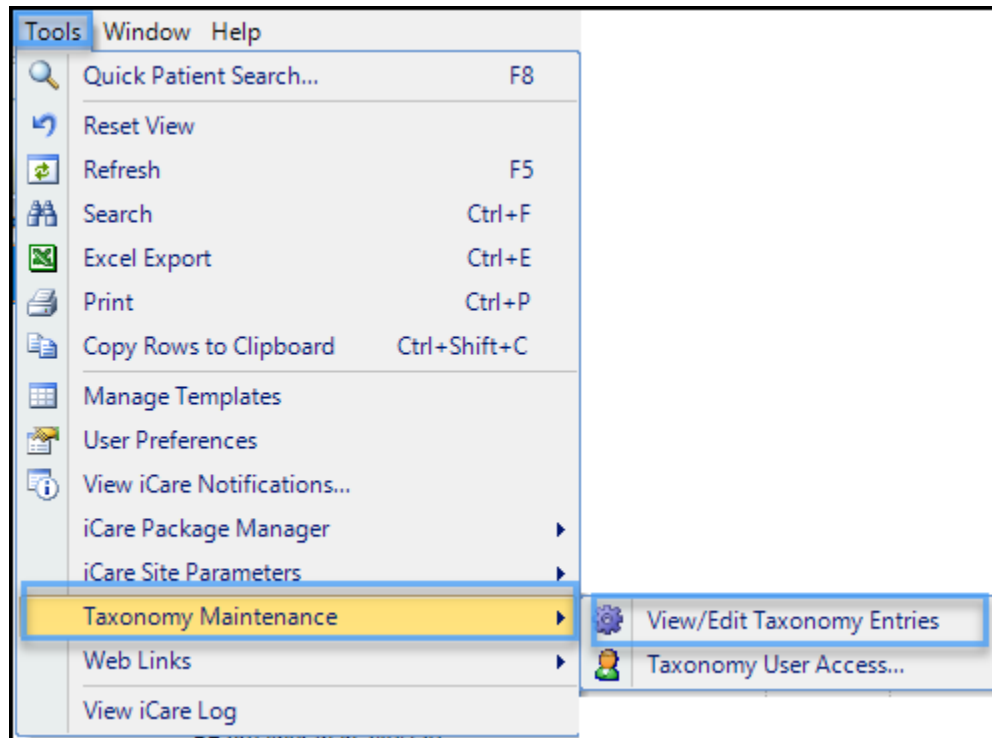



Figure 28-1: iCare Tools Menu

2. In the iCare Taxonomy View/Edit dialog box, find the taxonomy that needs to be updated. Double-click on the taxonomy to load. The taxonomies that are available for local edits include a notepad and pencil icon under the Edit column (). You will then be able to add to the taxonomy in the lower section of the box. The only time the remove option should be used is if it is an incorrect item for that particular taxonomy. Historical test (tests used in the past but no longer used) should NOT be removed.

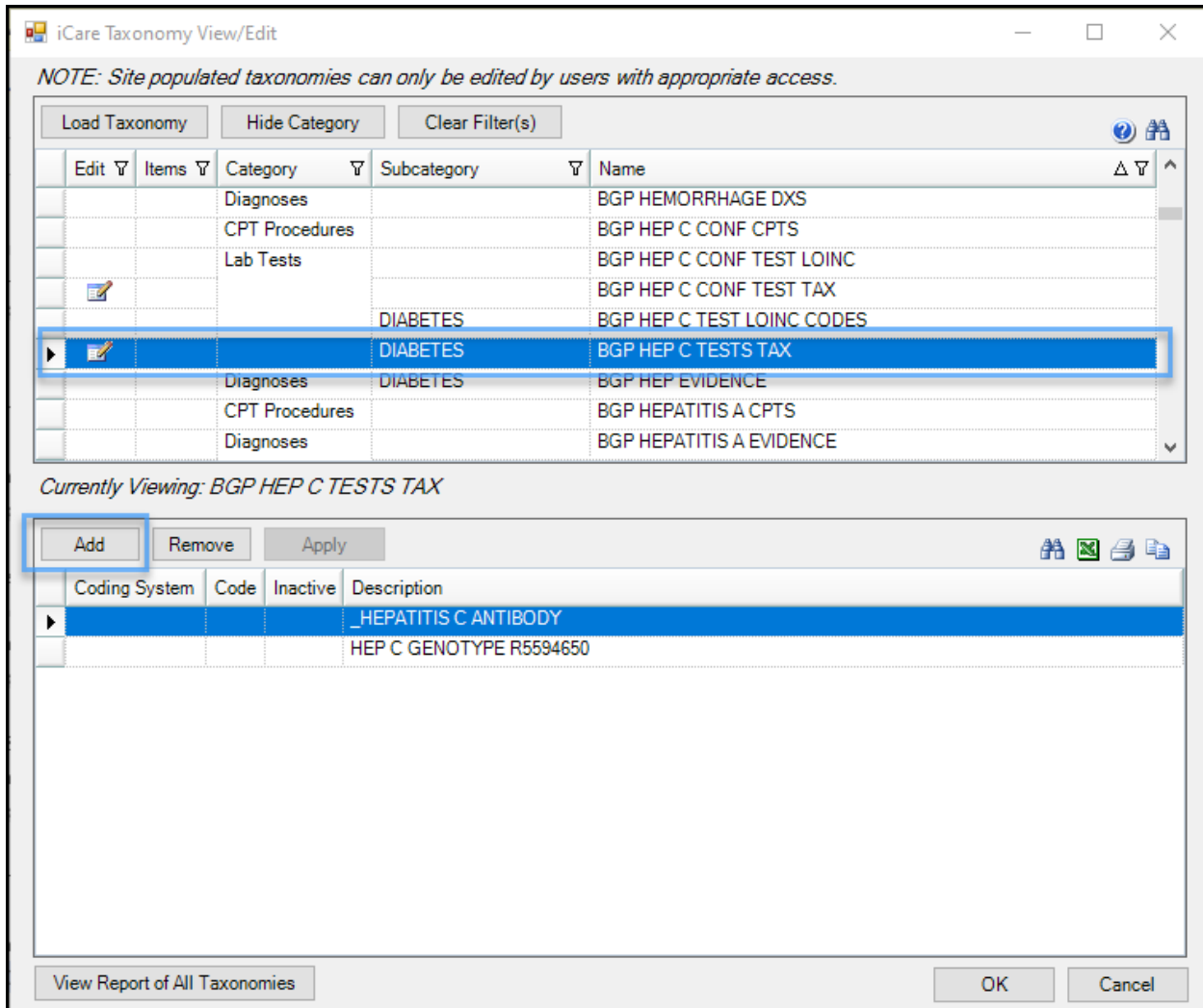


Figure 28-2: iCare Taxonomy View/Edit Popup Example

- Once the taxonomy is located and loaded, click on **Add**. A pop-up dialog will appear as shown below. Click **OK**.

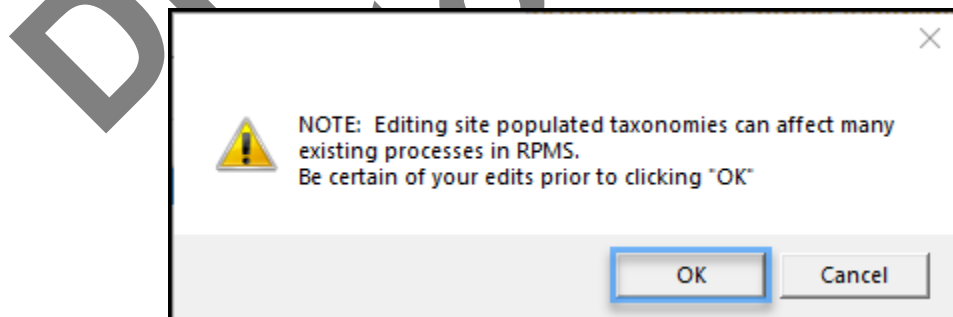


Figure 28-3: Popup Note menu

4. Type in the item that you are searching for. Click on **Find**. Locate the desired item from the list of items found and select it, then click **Select**. The item will be added to the taxonomy.

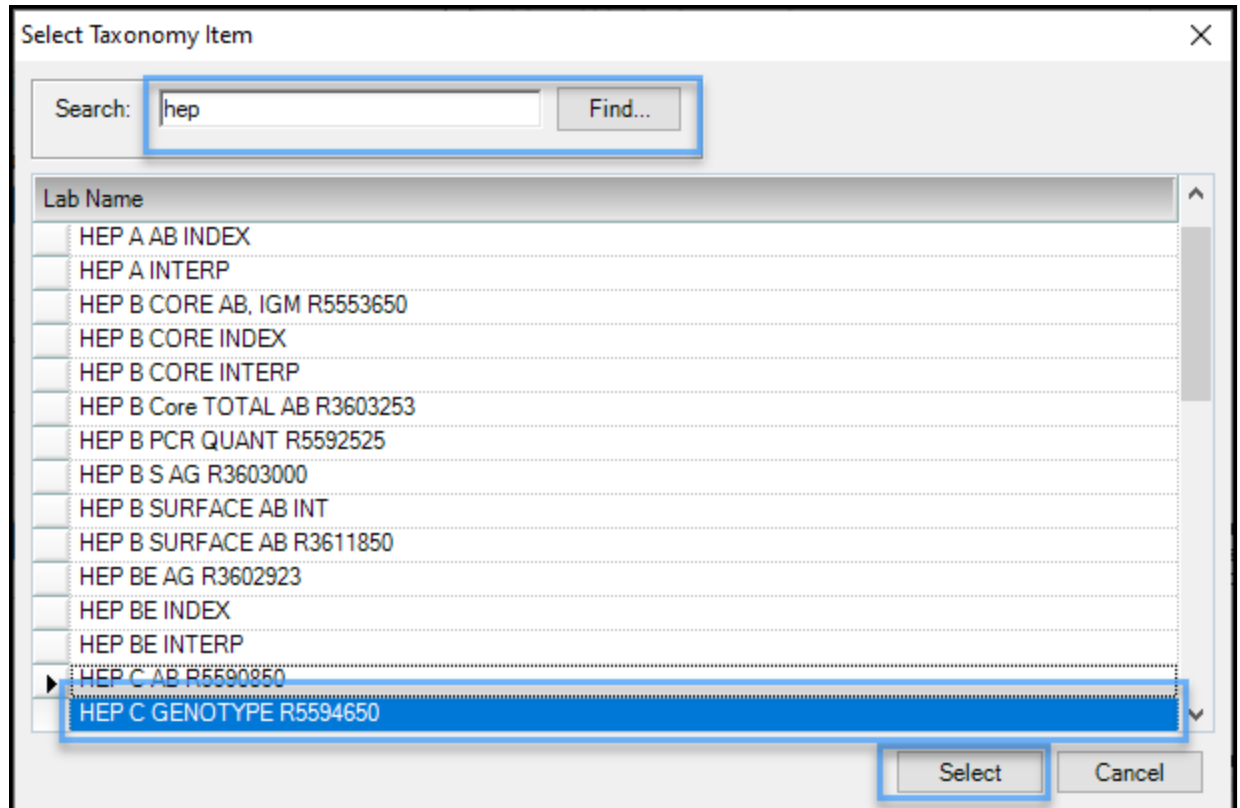


Figure 28-4: Select Taxonomy Item Example

A few notes:

- The list of taxonomies will include locally built and managed taxonomies. These have been developed for use when performing searches when using query tools like Q-man or VGEN.
- The entire list of taxonomies for the database can be viewed by using the View Report of All Taxonomies button in the lower left-hand corner of the iCare Taxonomy View/Edit dialog box as shown below.

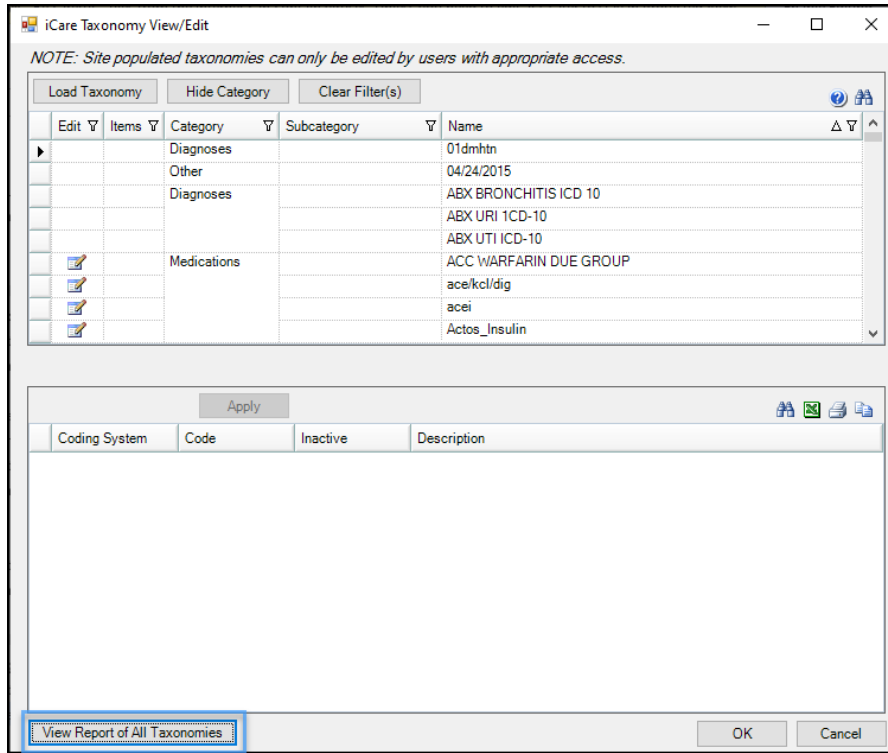


Figure 28-5: iCare taxonomy View/Edit Example

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29.0 Adverse Reaction Tracking (ART) Review

- Stores drugs, food, and other agents that the patient has a reaction or intolerance to.
- RPMS EHR uses this data to alert users in various locations throughout RPMS and EHR.
- Reactants identified by end-users should be reviewed by pharmacists and corrected if needed.

29.1 Recommendations

- Set up Mailman to send alerts to appropriate staff (e.g. nurse or pharmacists).
 - Identify users to add in addition to yourself
 - Add to mail group GMRA REQUEST NEW REACTANT
- Review unverified allergies and adverse reactions.
- Ensure the process is well documented in a training program for future employees.
- Run FileMan report to identify any “Request to add new reactant” that have not been addressed.

Note: You *must* be on the mail group GMRA REQUEST NEW REACTANT for the following FileMan to work.

- Go to VA FileMan
- Copy the below recipe from the top line through “;;999”

```
PRINT
3.9
'SENT
T-180
T
SUB
Request to add new reactant
Request to add new reactanz

[CAP
B

;;999
```

Figure 29-1: Request to add new reactant recipe in FileMan

- Paste at the “Select VA FileMan Option:”

- Consider Session logging the information via a telnet client (e.g. SecureCRT, NetTerm) through SecureCRT RPMS interface or directly printing the information by sending it to an RPMS Printer.

29.2 Identified Collaborative Team

- Pharmacy
- Pharmacy Informatics
- Area Clinical Informaticist (as needed)

29.3 Method

1. Review Mailman. See next section:
2. Review outstanding allergies and adverse reactions that need verified. Navigate to Adverse Reaction Tracking Verifier Menu-> Verify Patient Reaction Data. See below example.

```

Select Adverse Reaction Tracking Verifier Menu Option: 2 Verify Patient Reaction
Data
Would you like to verify a single patient's data? NO// <ENTER>

          D Drug
          N Non-drug
          B Both

Select type of AGENT to verify:(D/N/B): B

      PATIENT                ALLERGY                HIST ADR TYPE
      -----                -
1. DEMO,PATIENT A (294135)    ASPIRIN                HIST NO DRUG
2. DEMO,PATIENT Q (183043)    COCONUTS                HIST NO DRUG
                                     FOOD
3. DEMO,PATIENT L (289089)    SUNTAN LOTIONS         HIST UNK OTHER
4. DEMO,PATIENT T (317715)    NICKEL                  HIST UNK OTHER
5. DEMO,PATIENT W (165930)    ANIMAL HAIR             HIST UNK OTHER
6. DEMO,PATIENT R (308748)    DAIRY PRODUCTS         HIST NO FOOD
7. DEMO,PATIENT R (286826)    ADHESIVE TAPE          HIST UNK OTHER

Select a number between 1-7: 1
PATIENT: DEMO,PATIENT A                CAUSATIVE AGENT: ASPIRIN
INGREDIENTS: ASPIRIN                    VA DRUG CLASSES: NON-OPIOID ANALGESICS
                                     PLATELET AGGREGATION
                                     SALICYLATES,ANTIRHEUM

SOURCE OF INFORMATION: EXTERNAL SOURCE
ORIGINATOR: DEMO,NURSE                ORIGINATED: Jun 12, 2020@13:39:25
SIGN OFF: YES                          OBS/HIST: HISTORICAL
EVENT: DRUG ALLERGY                    CODE: 416098002

ID BAND MARKED:                        CHART MARKED:

SIGNS/SYMPTOMS: HYPOTENSION (Jun 12, 2020@13:33:25)
    
```

MECHANISM: ALLERGY
Is the reaction information correct? Yes//

Figure 29-2: Adverse Reaction Tracking Verifier menu, Verify patient reaction data

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30.0 Mailman Group Review

- RPMS tool used to alert or communicate to identify SMEs about issues or actions.
- Identifies who gets alerts via locally defined groups.
- Configuration and ongoing updates are needed to ensure the right information is shared with the correct stakeholders.

30.1 Recommendations

- Appropriate departments and RPMS Administrators should review and evaluate mailman groups regularly and edit them as needed.
- The review should be a standard part of the Onboarding/Off boarding process. If performed consistently as a standard part of this process, maintenance needs are minimized.
- Important to note that if correct individuals are not assigned, it could lead to an adverse event that could impact a patient.

30.2 Identified Collaborative Team

- RPMS Administrator.
- Clinical Informaticist.
- Supervisors of applicable departments such as Human Resources, Health Information Management, IT, Clinical Informaticists that are onboarding or off boarding staff.

30.3 Method

Print FileMan File “Mail Group” and do “[CAP”. Perform review of personnel assigned to each group. Update as needed.

- Currently recognized important mailman to consider for use.

Pharmacy:

- APSP EPRESCRIBING
- APSQ DRUG AWP/AAC NOTIFICATION
- BCMA ISSUES
- BEHO EPCS INCIDENT RESPONSE
- BOP MAILGROUP
- BPD EXPORT MANAGEMENT
- CMOP MANAGERS
- GMRA MARK CHART

- GMRA P&T COMMITTEE FDA
- GMRA REQUEST NEW REACTANT
- GMRA VERIFY DRUG ALLERGY
- GMRA VERIFY FOOD ALLERGY
- GMRA VERIFY OTHER ALLERGY
- NDF DATA
- PSO DRUG

Informatics:

- PXRМ ERRORS (Reminder errors).

Health Information Management:

- BEHOCCD HIMS TOC
- DGPF LOCAL FLAG REVIEW
- TIU MIS ALERTS (Is used in missing cosigner TaskMan)

Laboratory Informaticist:

- BLRLINK.
- LAB HIGH URGENCY NOTIFICATION
- LAB MESSAGING
- LAB QUALITATIVE ALERT

Purchased/Referred Care:

- BMC CHS ALERT
- BMC IHS ALERT
- BMC INHOUSE ALERT
- BMC OTHER ALERT

Others:

- AGMPI
- BLR LAB PATIENT MERGE
- BYIM EXPORT/IMPORT GROUP
- DIABETIC COORDINATOR (not clear if this still works)
- LMI
- RPMS Dental–Dentrix if used

30.4 Report Example

SPI NOTIFICATION (Surescripts Provider Identification) MAIL GROUP LIST

NAME : ADEX-ABEND

```

NAME: ADEX-COMPLETE
NAME: ADEX-START
NAME: AGMP MPI                                TYPE: public
COORDINATOR: ADAM,ADAM
DESCRIPTION:  This mail group will receive alerts when there is an error in MPI
message processing. Members should include those who would be fixing and
reprocessing messages that contain errors.
ORGANIZER: ADAM,ADAM
NAME: AMER ER PATIENT MERGE ALERTS           TYPE: public
ALLOW SELF ENROLLMENT?: YES                 RESTRICTIONS: UNRESTRICTED
COORDINATOR: ADAM,ADAM
DESCRIPTION:  This is the mail group is used to distribute ERS Patient Merge Alert
messages
ORGANIZER: ADAM,ADAM
NAME: APSP EPRESCRIBING                       TYPE: private
ALLOW SELF ENROLLMENT?: NO                 RESTRICTIONS: UNRESTRICTED
COORDINATOR: POSTMASTER
DESCRIPTION:  Contains recipients of bulletins regarding the status of e-
Prescribing messages.
ORGANIZER: POSTMASTER
    
```

Figure 30-1: Mail Group List Report Example

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31.0 VueCentric Template (EHR GUI) Review

- VueCentric Template is the graphical user interface of RPMS EHR.
- “Ease of Use” and readability should be evaluated to improve usability and to ensure optimal use of RPMS EHR.
- Standardization can facilitate troubleshooting, improve the user experience, and simplify training.

31.1 Recommendations

- Review EHR for usability enhancements and standardization options.
- Assign VueCentric templates by role and remove individual preferences.
- Make backup copies of all current VueCentric templates.
- In Areas where GUI templates are standardized and controlled, it is highly recommended to work with Area Office SME to make a change request. It is not recommended for local sites to change GUI templates independently.

31.2 Identified Collaborative Team

- Clinical Informaticist
- Multidisciplinary Team
- Area HIM Consultant or Area Clinical Informaticist (as needed)

31.3 Method

Use VcManager and Template Registry Tab to:

- Select **Associations...** and review current VueCentric template assignments. Use the **Defaults...** button to better organize how your system is laid out.
- Export or Import VueCentric Templates.

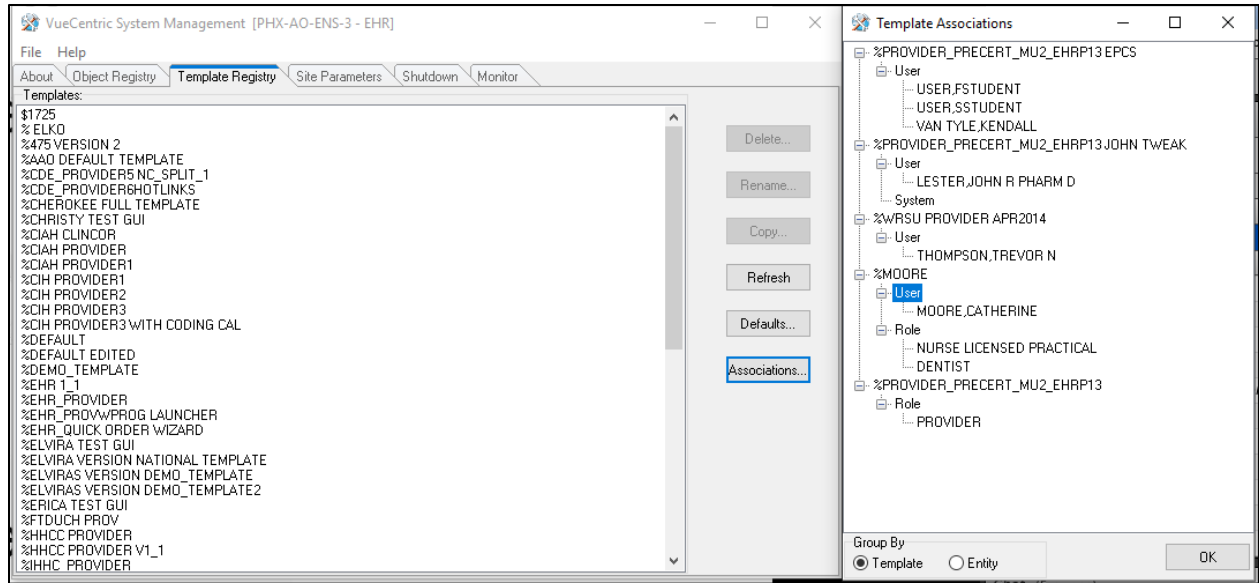


Figure 31-1: Template Registry tab

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32.0 User in the System

- Up-to-date and accurate user profiles ensure that a profile is functional and users are appropriately identified and mapped in RPMS EHR.
- When a user leaves, their RPMS EHRaccount needs to be disabled, and user class and keys removed (follow off-boarding recommendations for timing).
- Proper off-boarding procedures declutters the available provider choices in RPMS EHR.

32.1 Recommendation

- Review and cleanup users in system.
- Review, optimize and monitor onboarding/off-boarding process.

32.2 Identified Collaborative Team

- RPMS Administrator
- Multidisciplinary onboarding/off-boarding team
 - Human Resources
 - HIM
 - Department Supervisor
 - IT
 - Clinical Informaticist.
 - Area HIM consultant or Area Clinical Informaticist (as needed)

32.3 Method

- Review onboarding/off-boarding process yearly.
- Determine the use of “Deactivate User” and “Inactivate User”.
- Review System Set up.
- Check XX Parameter “XU645” is set to Yes.
- Review TaskMan Task “XUAUTODEACTIVATE” is set to run daily or how often identified by your RPMS manager.
- Run the following Reports and Review for appropriateness (e.g., Suffix, Service Section, Provider Class, User Class).
- Go to VA FileMan-> Print File entries

- FileMan file = USR CLASS MEMBERSHIP
- Consider General FileMan if the report does not generate
- Ensure your telnet session is setup to handle 300 columns
- Copy from the top until the line right above 0;300;999999999
- Paste at the “OUTPUT FROM WHAT FILE: //”

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Active Users:

```

USR CLASS MEMBERSHIP
@NUMBER
FIRST

"Internal Entry Number"_"^";X
"Provider Name"_"^";X
"Service / Section"_"^";X
"Provider Class"_"^";X
"Last Sign On"_"^";X
"Termination Date"_"^";X
"Termination Reason"_"^";X
"Disuser"_"^";X
"Inactive Date"_"^";X
"Time Read"_"^";X
"User Class"_"^";X

@
NCI ACTIVE USER REVIEW HEADER
Y
Y
^

P
USR CLASS MEMBERSHIP
NEW PERSON:
@.01
FIRST
NEW PERSON:
@Disuser
@
@
Y

NCI ACTIVE USER REVIEW SORT 2
Y
NO

NEW PERSON:
NUMBER_"^";R2;C1
(#.01)_"^";X;R2
(#29)_"^";X;R2
Y
(#53.5)_"^";X;R2
Y
(#202)_"^";X;R2
Y
(#9.2)_"^";X;R2
Y
(#9.4)_"^";X;R2
Y
(#7)_"^";X;R2
Y
(#53.4)_"^";X;R2
Y
(#200.1)_"^";X
Y

USER CLASS_"^";X;R2
    
```

```

USR CLASS MEMBERSHIP LIST
[NCI ACTIVE USER REVIEW HEADER

NCI ACTIVE USER REVIEW PRINT
Y
1
0;300;999999999999
    
```

Figure 32-1: USR CLASS MEMBERSHIP FileMan Print Copy/Paste Entries

- Consider Session logging the information via a telnet client (e.g. SecureCRT, Netterm) or directly printing the information by sending it to an RPMS Printer.
- Import into Excel and delimitate by “^”.
 - Open Excel then go to data tab.
 - Select from text/CSV.
 - Select your file.
 - Import file.
 - Delimiter-custom “^”.
 - Data Type Detection- select based on entire dataset.
 - Load.

Alternative Option:

```

Go to Va FileMan -> Print File entries
OUTPUT FROM WHAT FILE: USR CLASS MEMBERSHIP// USR CLASS MEMBERSHIP
(448 entries)

SORT BY: NUMBER// NEW PERSON:
NEW PERSON FIELD: @.01 NAME
START WITH NAME: FIRST// FIRST
WITHIN NAME, SORT BY: NEW PERSON:
NEW PERSON FIELD: @Disuser
START WITH DISUSER: FIRST// @
GO TO DISUSER: LAST// @
WITHIN DISUSER, SORT BY: Y??
WITHIN DISUSER, SORT BY:

STORE IN 'SORT' TEMPLATE: NCI ACTIVE USER REVIEW SORT 2
(Aug 30, 2023@14:19) User #1723 File #8930.3 SORT
DATA ALREADY STORED THERE...OK TO PURGE? NO// YES
DESCRIPTION:
No existing text
Edit? NO// NO
SHOULD TEMPLATE USER BE ASKED 'FROM'-'TO' RANGE FOR 'DISUSER'? NO//
FIRST PRINT FIELD: NEW PERSON:
THEN PRINT NEW PERSON FIELD: NUMBER_ "^";R2;C1
THEN PRINT NEW PERSON FIELD: (#.01)_ "^";X;R2
THEN PRINT NEW PERSON FIELD: (#29)_ "^";X;R2
By '#29', do you mean NEW PERSON 'SERVICE/SECTION'? Yes// Y (Yes)
THEN PRINT NEW PERSON FIELD: (#53.5)_ "^";X;R2
By '#53.5', do you mean NEW PERSON 'PROVIDER CLASS'? Yes// Y (Yes)
THEN PRINT NEW PERSON FIELD: (#202)_ "^";X;R2
By '#202', do you mean NEW PERSON 'LAST SIGN-ON DATE/TIME'? Yes// Y (Yes)
THEN PRINT NEW PERSON FIELD: (#9.2)_ "^";X;R2
By '#9.2', do you mean NEW PERSON 'TERMINATION DATE'? Yes// Y (Yes)
THEN PRINT NEW PERSON FIELD: (#9.4)_ "^";X;R2
    
```

```

By '#9.4', do you mean NEW PERSON 'Termination Reason'? Yes// Y (Yes)
THEN PRINT NEW PERSON FIELD: (#7) "^";X;R2
By '#7', do you mean NEW PERSON 'DISUSER'? Yes// Y (Yes)
THEN PRINT NEW PERSON FIELD: (#53.4) "^";X;R2
By '#53.4', do you mean NEW PERSON 'INACTIVE DATE'? Yes// Y (Yes)
THEN PRINT NEW PERSON FIELD: (#200.1) "^";X
By '#200.1', do you mean NEW PERSON 'TIMED READ (# OF SECONDS)'? Yes// Y
(Yes)
THEN PRINT NEW PERSON FIELD:
THEN PRINT FIELD: USER CLASS "^";X;R2
THEN PRINT FIELD:
Heading (S/C): USR CLASS MEMBERSHIP LIST Replace USR CLASS MEMBERSHIP LIST With
[NCI ACTIVE USER REVIEW HEADER Replace
[NCI ACTIVE USER REVIEW HEADER
(Aug 30, 2023@14:20) User #1723 File #8930.3
STORE PRINT LOGIC IN TEMPLATE: NCI ACTIVE USER REVIEW PRINT
(Aug 30, 2023@14:19) User #1723 File #8930.3
TEMPLATE ALREADY STORED THERE.... OK TO REPLACE? Y (Yes)
START AT PAGE: 1// 1
DEVICE: 0;300;9999999999

```

Figure 32-2: USR CLASS MEMBERSHIP FileMan Print Entries Detailed Steps

Inactive Users:

- Consider Session logging the information via a telnet client (e.g. SecureCRT, NetTerm) or directly printing the information by sending it to an RPMS Printer.
- Import into excel and delimitate by “^”
 - Open Excel then go to data tab
 - Select from text/CSV
 - Select your file
 - Import file
 - Delimiter-custom “^”
 - Data Type Detection- select based on entire dataset
 - Load

```

USR CLASS MEMBERSHIP
@NUMBER
FIRST

"Internal Entry Number"_"^";X
"Provider Name"_"^";X
"Service / Section"_"^";X
"Provider Class"_"^";X
"Last Sign On"_"^";X
"Termination Date"_"^";X
"Termination Reason"_"^";X
"Disuser"_"^";X
"Inactive Date"_"^";X
"Time Read"_"^";X
"User Class"_"^";X

@
NCI ACTIVE USER REVIEW HEADER
Y
Y
^

P
USR CLASS MEMBERSHIP
NEW PERSON:
@.01
FIRST
NEW PERSON:
@LAST SIGN-ON DATE/TIME<(TODAY-180)
Y

NCI ACTIVE USER REVIEW SORT 1
Y
NO

NEW PERSON:
NUMBER_"^";R2;C1
(#.01)_"^";X;R2
(#29)_"^";X;R2
Y
(#53.5)_"^";X;R2
Y
(#202)_"^";X;R2
Y
(#9.2)_"^";X;R2
Y
(#9.4)_"^";X;R2
Y
(#7)_"^";X;R2
Y
(#53.4)_"^";X;R2
Y
(#200.1)_"^";X
Y

USER CLASS_"^";X;R2

USR CLASS MEMBERSHIP LIST
[NCI ACTIVE USER REVIEW HEADER

NCI INACTIVE USER REVIEW PRINT

```

```

Y
1
0;300;99999999
    
```

Figure 32-3: USR CLASS MEMBERSHIP, NCI ACTIVE USER REVIEW FileMan Print Copy/Paste Entries

- Consider Session logging the information via a telnet client (e.g. SecureCRT, Netterm) or directly printing the information by sending it to an RPMS Printer.
- Import into excel and delimitate by “^”
 - Open Excel then go to data tab
 - Select from text/CSV
 - Select your file
 - Import file
 - Delimiter-custom “^”
 - Data Type Detection- select based on entire dataset
 - Load

Alternative options:

```

OUTPUT FROM WHAT FILE: USR CLASS MEMBERSHIP// USR CLASS MEMBERSHIP
                                                                (448 entries)
SORT BY: NUMBER// NEW PERSON:
NEW PERSON FIELD: @.01 NAME
START WITH NAME: FIRST// FIRST
WITHIN NAME, SORT BY: NEW PERSON:
NEW PERSON FIELD: @LAST SIGN-ON DATE/TIME<(TODAY-180)
  By 'LAST SIGN', do you mean NEW PERSON 'LAST SIGN-ON DATE/TIME'? Yes// Y
(Yes)
  WITHIN LAST SIGN-ON DATE/TIME<(TODAY-180), SORT BY:
STORE IN 'SORT' TEMPLATE: NCI ACTIVE USER REVIEW SORT 1
  Are you adding 'NCI ACTIVE USER REVIEW SORT 1' as
  a new SORT TEMPLATE? No// Y (Yes)
DESCRIPTION:
  No existing text
  Edit? NO// NO
FIRST PRINT FIELD:
FIRST PRINT FIELD: NEW PERSON:
  THEN PRINT NEW PERSON FIELD: NUMBER "^";R2;C1
  THEN PRINT NEW PERSON FIELD: (#.01)^";X;R2
  THEN PRINT NEW PERSON FIELD: (#29)^";X;R2
  By '#29', do you mean NEW PERSON 'SERVICE/SECTION'? Yes// Y (Yes)
  THEN PRINT NEW PERSON FIELD: (#53.5)^";X;R2
  By '#53.5', do you mean NEW PERSON 'PROVIDER CLASS'? Yes// Y (Yes)
  THEN PRINT NEW PERSON FIELD: (#202)^";X;R2
  By '#202', do you mean NEW PERSON 'LAST SIGN-ON DATE/TIME'? Yes// Y (Yes)
  THEN PRINT NEW PERSON FIELD: (#9.2)^";X;R2
  By '#9.2', do you mean NEW PERSON 'TERMINATION DATE'? Yes// Y (Yes)
  THEN PRINT NEW PERSON FIELD: (#9.4)^";X;R2
  By '#9.4', do you mean NEW PERSON 'Termination Reason'? Yes// Y (Yes)
  THEN PRINT NEW PERSON FIELD: (#7)^";X;R2
  By '#7', do you mean NEW PERSON 'DISUSER'? Yes// Y (Yes)
  THEN PRINT NEW PERSON FIELD: (#53.4)^";X;R2
  By '#53.4', do you mean NEW PERSON 'INACTIVE DATE'? Yes// Y (Yes)
    
```



```

THEN PRINT NEW PERSON FIELD: (#200.1)_"^";X
  By '#200.1', do you mean NEW PERSON 'TIMED READ (# OF SECONDS) '? Yes// Y
  (Yes)
THEN PRINT NEW PERSON FIELD:
THEN PRINT FIELD: USER CLASS_"^";X;R2
THEN PRINT FIELD:
Heading (S/C): USR CLASS MEMBERSHIP LIST  Replace USR CLASS MEMBERSHIP LIST With
[NCI ACTIVE USER REVIEW HEADER  Replace
  [NCI ACTIVE USER REVIEW HEADER
                                (Aug 30, 2023@14:22) User #1723 File #8930.3

STORE PRINT LOGIC IN TEMPLATE: NCI INACTIVE USER REVIEW PRINT
  Are you adding 'NCI INACTIVE USER REVIEW PRINT' as
  a new PRINT TEMPLATE? No// Y  (Yes)
START AT PAGE: 1// 1
DEVICE:
    
```

Figure 32-4: USR CLASS MEMBERSHIP, NCI ACTIVE USER FileMan Print Entries Detailed Steps

32.4 Report Example

Active Users Report:

Internal	User Name	Service / Section	Provider Class	Last Sign On	Terminati	Terminati	Disuser	Inactive Date
1	ADAM,ADAM	BUSINESS OFFICE		AUG 17,2021@19:41:24				
2072	xxxxxxxx LPN	AMBULATORY CARE	LICENSED PRACTICAL NURSE	AUG 13,2021@08:10:46				
333	xxxxxxxx J MD	AMBULATORY CARE	MD	AUG 18,2021@11:42:31				
333	xxxxxxxx J MD	AMBULATORY CARE	MD	AUG 18,2021@11:42:31				
2649	Axxxxxxxx	AMBULATORY CARE		AUG 18,2021@08:43:43				
2649	xxxxxxxx J MD	AMBULATORY CARE		AUG 18,2021@08:43:43				
1020	xxxxxxxx DDS	DENTAL	DENTIST	AUG 6,2021@14:18:54				
1020	xxxxxxxx DDS	DENTAL	DENTIST	AUG 6,2021@14:18:54				
2592	xxxxxxxx	AMBULATORY CARE	NUTRITIONIST	AUG 18,2021@08:52:57				

Figure 32-5: Active Users report in Excel

Inactive Users:

Internal Entry Number	User Name	Service / Section	Provider Class	Last Sign On	Termination Date
2296		PHARMACY	PHARMACIST	JAN 8,2019@08:07	JUN 6,2021
1484		AMBULATORY CARE	PSYCHOLOGIST	JUL 3,2013@08:58:14	
1762		OPTOMETRY	OPTOMETRY STUDENT	MAY 15,2015@13:02:51	
1985		MEDICAL RECORDS	CODING/DATA ENTRY	JUL 11,2017@07:20:46	MAR 29,2018
1704		AMBULATORY CARE	CLINIC RN	APR 27,2016@11:06	
1281		AMBULATORY CARE	MEDICAL TECHNOLOGIST	SEP 16,2011@15:11:58	OCT 23,2012
1830		AMBULATORY CARE	CLINIC RN	SEP 25,2015@14:45:50	
262		AMBULATORY CARE	OTHER	SEP 27,2019@13:00:58	SEP 29,2019
2443		AMBULATORY CARE	PHYSICIAN ASSISTANT	NOV 26,2019@14:00:10	DEC 19,2019

Figure 32-6: Inactive User in Excel

33.0 Signature Block Review

Signature Block is part of a signed TIU Progress Note and are used for Medical-Legal Authentication of notes and billing purposes.

33.1 Recommendations

To review entries with RPMS Administrator and HIM, determine the proper setup, and then standardize (clean-up inconsistencies).

- Include proper accurate Signature Block Name: Users legal name and professional credentials in mixed case (e.g., John Doe, MD).
- Include Signature Block Title: Licensed Specialty (i.e., Medical Doctor, Registered Nurse, Registered Pharmacist, etc).

33.2 Identified Collaborative Team

- RPMS Administrator
- HIM
- Department Supervisor
- Clinical Informaticist
- Area HIM consultant or Area Clinical Informaticist (as needed)

33.3 Method

- Go to FileMan-> Print File entries.
- FileMan file = USR CLASS MEMBERSHIP
- Copy from the top until the line right above 0;300;999999999
- Paste at the "OUTPUT FROM WHAT FILE: //"

USR CLASS MEMBERSHIP

```

USR CLASS MEMBERSHIP
@NUMBER
FIRST

"User Name^";C1
"Service/Section^";C11
"Provider Class^";C27
"Printed Name with Credentials - Signature Block Name^";C42
"Specialty - Signature Block Title^";C95

@
NCI SIG BLOCK REVIEW HEADER
Y
Y
    
```

```

^
P
USR CLASS MEMBERSHIP
NEW PERSON:
@.01
FIRST
NEW PERSON:
@Disuser
@
@
Y

NCI SIG BLOCK REVIEW SORT
Y
NO

NEW PERSON:
(#.01) "^";X
SERVICE/SECTION_"^";X
Y
PROVIDER CLASS_"^";X
SIGNATURE BLOCK PRINTED NAME_"^";X
SIGNATURE BLOCK TITLE_"^";X

USR CLASS MEMBERSHIP LIST
[NCI SIG BLOCK REVIEW HEADER

NCI SIG BLOCK REVIEW PRINT
Y
1
0;300;999999999999
    
```

Figure 33-1: USR CLASS MEMBERSHIP, NCI SIG BLOCK REVIEW FileMan Print Copy/Paste Entries in excel

Alternatively:

```

OUTPUT FROM WHAT FILE: USR CLASS MEMBERSHIP// USR CLASS MEMBERSHIP
                                                                (448 entries)
SORT BY: NUMBER// NEW PERSON:
NEW PERSON FIELD: @.01 NAME
START WITH NAME: FIRST// FIRST
  WITHIN NAME, SORT BY: NEW PERSON:
    NEW PERSON FIELD: @Disuser
    START WITH DISUSER: FIRST// @
    GO TO DISUSER: LAST// @
      WITHIN DISUSER, SORT BY: Y??
      WITHIN DISUSER, SORT BY:
STORE IN 'SORT' TEMPLATE: NCI SIG BLOCK REVIEW SORT
                                                                (Aug 30, 2023@14:31) User #1723 File #8930.3 SORT
DATA ALREADY STORED THERE...OK TO PURGE? NO// YES
DESCRIPTION:
  No existing text
  Edit? NO// NO
SHOULD TEMPLATE USER BE ASKED 'FROM'-'TO' RANGE FOR 'DISUSER'? NO//
FIRST PRINT FIELD: NEW PERSON:
  THEN PRINT NEW PERSON FIELD: (#.01)_"^";X
  THEN PRINT NEW PERSON FIELD: SERVICE/SECTION_"^";X
  By 'SERVICE', do you mean NEW PERSON 'SERVICE/SECTION'? Yes// Y (Yes)
    
```

```

THEN PRINT NEW PERSON FIELD: PROVIDER CLASS_ "^";X
THEN PRINT NEW PERSON FIELD: SIGNATURE BLOCK PRINTED NAME_ "^";X
THEN PRINT NEW PERSON FIELD: SIGNATURE BLOCK TITLE_ "^";X
THEN PRINT NEW PERSON FIELD:
THEN PRINT FIELD:
Heading (S/C): USR CLASS MEMBERSHIP LIST  Replace USR CLASS MEMBERSHIP LIST With
[NCI SIG BLOCK REVIEW HEADER  Replace
  [NCI SIG BLOCK REVIEW HEADER
                                     (Aug 30, 2023@14:31) User #1723 File #8930.3
STORE PRINT LOGIC IN TEMPLATE: NCI SIG BLOCK REVIEW PRINT
                                     (Aug 30, 2023@14:31) User #1723 File #8930.3
TEMPLATE ALREADY STORED THERE.... OK TO REPLACE? Y  (Yes)
START AT PAGE: 1// 1
DEVICE:
    
```

Figure 33-2: Signature Block Review, alternative option

Report Example:

User Name	Service/Section	Provider Class	Printed Name with Crede	Specialty - Signature Block Title
ADAM,ADAM	BUSINESS OFFICE		ADAM ADAM	STUDENT
xxxxxxxxxxxx LPN	AMBULATORY CARE	LICENSED PRACTICAL NURSE	xxxxxxxx, LPN	
xxxxxxxj MD	AMBULATORY CARE	MD	xxxxxxxxxxxxxxxxxxxx	MD
	AMBULATORY CARE			
xxxxxxxxxxx DDS	DENTAL	DENTIST	xxxxxxxx, DDS	DDS
xxxxxxxxxxx	AMBULATORY CARE	NUTRITIONIST	xxxxxxxxxxxxxxxxxxxx	Registered Dietitian Nutritionist
xxxxxxxxxxx	AMBULATORY CARE	CODING/DATA ENTRY		
Bxxxxxxxxxxx	AMBULATORY CARE			
xxxxxxx	AMBULATORY CARE		xxxxxxxxxxxxxxxxxxxx	
xxxxxxxxxxx	AMBULATORY CARE	DENTAL ASSISTANT		
xxxxxxxxxxxxxxx	AMBULATORY CARE	ADMINISTRATIVE		

Figure 33-3: Report Example in Excel

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October 1, 2024

34.0 RPMS EHR Training Program Review

- Encompasses all aspects of the RPMS EHR components and applications
- Long enough to fully cover EHR component and functionality (i.e., a couple of days).
- Departments conduct further training and competency.
- Poor or inadequate training programs have contributed to patient safety and documentation issues.
- Training plan should be documented for all areas.
- Responsibility of the supervisor

34.1 Recommendations

- Develop or use a documented full training program.
- Department specific training should be organized and well documented culminating in a competency.

34.2 Identified Collaborative Team

- Informatics or Training Team for centralized training.
- Department Supervisor for the individual department.

34.3 Method

Review Local General Training and discuss with departments their training and competency. Consider reviewing training options available in the RPMS Recordings and Materials Library.

- Go to:
 - <https://www.ihs.gov/rpms/training/recording-and-material-library/>
- Sign into your account or make one.

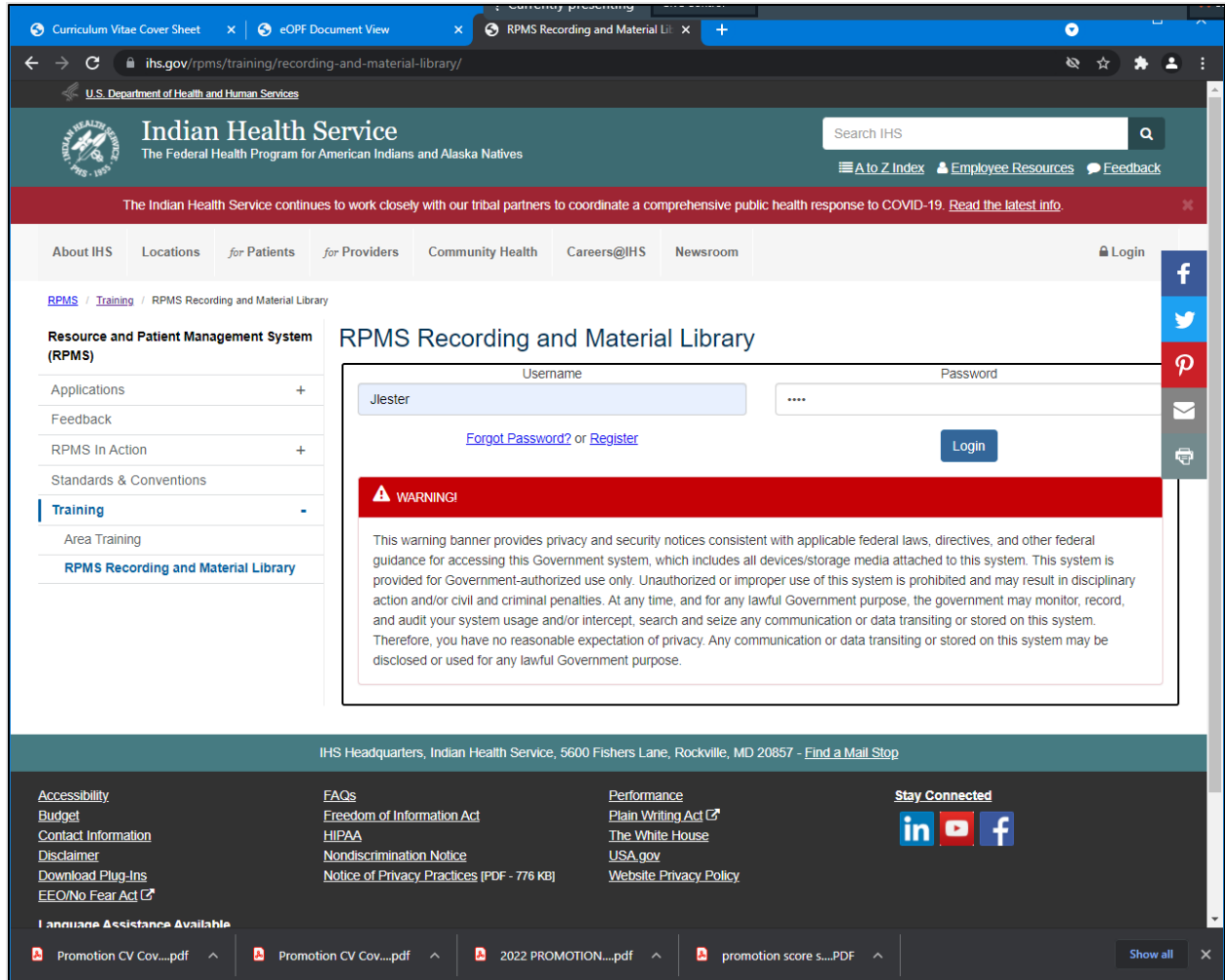


Figure 34-1: RPMS Recording and Material Library

- Complete search for training needs.

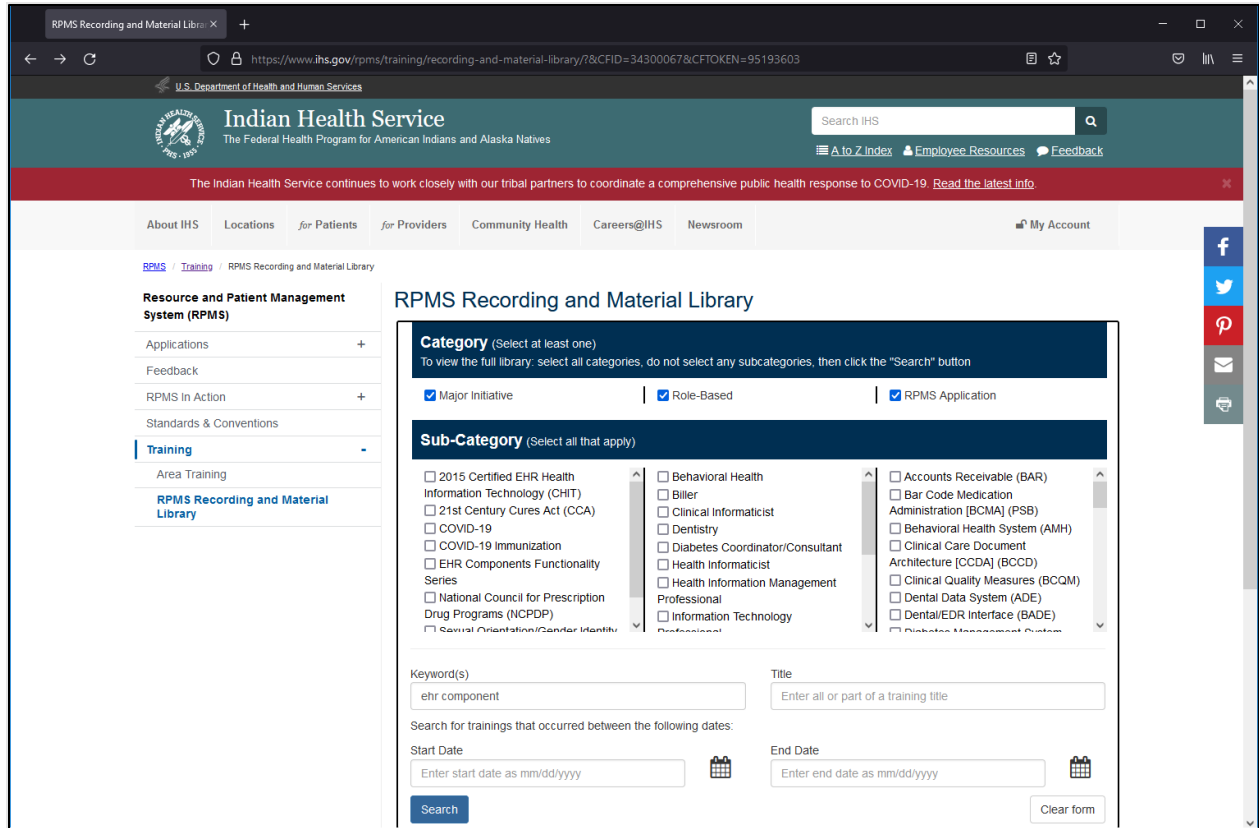


Figure 34-2: RPMS Recording and Material Library, Categories and Sub-Categories

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35.0 Demo Patient Review

Proper Demo Patient creation is important to ensure exclusion from the PCC, GPRA reports, the PHR, BDW exports, and more.

35.1 Recommendations

- Develop a policy and procedure for demo patient creation to ensure proper set up
- Review all demo patients annually to ensure any new demo patients are created correctly and that existing demo patients haven't been altered.

35.2 Identified Collaborative Team

- HIM
- Clinical Informaticist

35.3 Method

1. Create a local policy outlining the proper set up of a demo patient in RPMS.

Demo patients should be configured using appropriate standard guidelines:

- a. Name: DEMO, PATIENT XXXX. The LAST name MUST be "DEMO" and the FIRST name MUST be "PATIENT" and may have one or more MIDDLE name(s) of your choosing. (i.e. DEMO,PATIENT BCMA ALPHA)
- b. Create the medical record number using this nomenclature 9999XX
- c. SSN: needs to start with FIVE leading zeros. 000-00-XXXX with XXXX being any numbers you desire
- d. DEMO,PATIENTS must also be added in the demo patient taxonomy
 - PCC Manager Menu -> PCC Management Reports -> Other PCC Management Reports/Options -> Update the Demo/Test Patient Search Template

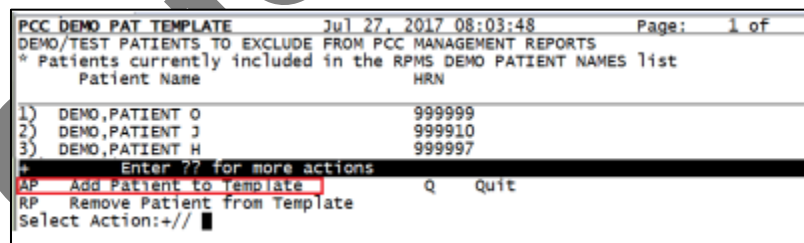


Figure 35-1: Add Patient to Template

Note: Each package handles demo patients different so you need all the above correct on each patient to cover multiple package exclusions and filters.

2. Review all demo patients annually.
 - a. Navigate to the menu option “Allow Viewing of Demo Patients Only” [BEHOPTCX DEMO MODE] and turn it on for the user that will conduct the demo patient review. This will give you the opportunity to review the demo patient names in EHR for proper set-up as well as determining if any REAL patients have mistakenly been set up incorrectly and are being filtered in as a demo patient.
 - This is also a good mode to use when recording training videos or trainings for large groups of people in a face-to-face setting.
 - b. Run the following FileMan search of the NEW PATIENT file looking for any name that contains “Demo” or “Test”. This WILL result some real patient data but is the best way to ensure that you are finding all the demo patients. After running the report review each demo patient and ensure they meet the standard guidelines outlined above.
 - Example Fileman recipe to review Demo Patients
 1. Go to FileMan -> Search File entries.
 2. FileMan file =VA PATIENT
 3. Copy from the top until the line right above 0;80;999
 4. Paste at the “OUTPUT FROM WHAT FILE: //”

```

2
.01
C
DEMO
.01
C
TEST
.01
C
PATIENT

A
B
C

HRCN
SSN
.01

```

0;80;999

Figure 35-2: Fileman Recipe

Alternatively:

```
OUTPUT FROM WHAT FILE: NEW PERSON// 2 VA PATIENT (211110 entries)

-A- SEARCH FOR VA PATIENT FIELD: .01 NAME
-A- CONDITION: CONTAINS
-A- CONTAINS: DEMO

-B- SEARCH FOR VA PATIENT FIELD: .01 NAME
-B- CONDITION: CONTAINS
-B- CONTAINS: TEST

-C- SEARCH FOR VA PATIENT FIELD: .01 NAME
-C- CONDITION: CONTAINS
-C- CONTAINS: PATIENT

-D- SEARCH FOR VA PATIENT FIELD:

IF: A NAME CONTAINS (case-insensitive) "DEMO"
OR: B Or NAME CONTAINS (case-insensitive) "TEST"
OR: C Or NAME CONTAINS (case-insensitive) "PATIENT"
OR:

STORE RESULTS OF SEARCH IN TEMPLATE:

SORT BY: NAME//
START WITH NAME: FIRST//
FIRST PRINT FIELD: HRCN
THEN PRINT FIELD: SSN SOCIAL SECURITY NUMBER
THEN PRINT FIELD: .01 NAME
THEN PRINT FIELD:
Heading (S/C): VA PATIENT SEARCH//
STORE PRINT LOGIC IN TEMPLATE:
DEVICE: 0;80;999
```

Figure 35-3 Alternative Fileman recipe

Appendix A Rules of Behavior

The Resource and Patient Management (RPMS) system is a United States Department of Health and Human Services (HHS), Indian Health Service (IHS) information system that is **FOR OFFICIAL USE ONLY**. The RPMS system is subject to monitoring; therefore, no expectation of privacy shall be assumed. Individuals found performing unauthorized activities are subject to disciplinary action including criminal prosecution.

All users (Contractors and IHS Employees) of RPMS will be provided a copy of the Rules of Behavior (ROB) and must acknowledge that they have received and read them prior to being granted access to a RPMS system, in accordance IHS policy.

- For a listing of general ROB for all users, see the most recent edition of *IHS Standard Operating Procedure General User Security Handbook* (SOP 06-11a).
- For a listing of system administrators/managers rules, see the most recent edition of the *IHS Technical and Managerial Handbook* (SOP 06-11b).

Both documents are available at this IHS website:

<https://home.ihs.gov/oittfs/standard-operating-procedures-sop/>

Note: Users must be logged on to the IHS D1 Intranet to access these documents.

The ROB listed in the following sections are specific to RPMS.

A.1 All RPMS Users

In addition to these rules, each application may include additional ROB that may be defined within the documentation of that application (e.g., Dental, Pharmacy). For the purposes of the below ROB, RPMS is defined as use of RPMS, EHR, Practice Management, VistA Imaging, and any other connected information system.

A.1.1 Access

RPMS users shall:

- Only use data for which you have been granted authorization.
- Only give information to personnel who have access authority and have a need to know.
- Always verify a caller's identification and job purpose with your supervisor or the entity provided as employer before providing any type of information system access, sensitive information, or nonpublic agency information.
- Be aware that personal use of information resources is authorized on a limited basis within the provisions *Indian Health Manual* Part 8, "Information Resources Management," Chapter 6, "Limited Personal Use of Information Technology Resources."

RPMS users shall not:

- Retrieve information for someone who does not have authority to access the information.
- Access, research, or change any user account, file, directory, table, or record not required to perform their *official* duties.
- Store sensitive files on a PC hard drive, or portable devices or media, if access to the PC or files cannot be physically or technically limited.
- Exceed their authorized access limits in RPMS by changing information or searching databases beyond the responsibilities of their jobs or by divulging information to anyone not authorized to know that information.

A.1.2 Information Accessibility

- RPMS shall restrict access to information based on the type and identity of the user. However, regardless of the type of user, access shall be restricted to the minimum level necessary to perform the job.

RPMS users shall:

- Access only those documents they created and those other documents to which they have a valid need-to-know and to which they have specifically granted access through an RPMS application based on their menus (job roles), keys, and FileMan access codes. Some users may be afforded additional privileges based on the functions they perform, such as system administrator or application administrator.
- Acquire a written preauthorization in accordance with IHS policies and procedures prior to interconnection to or transferring data from RPMS.

A.1.3 Accountability

RPMS users shall:

- Behave in an ethical, technically proficient, informed, and trustworthy manner.
- Log out of the system whenever they leave the vicinity of their personal computers (PCs).
- Be alert to threats and vulnerabilities in the security of the system.
- Report all security incidents to their local Information System Security Officer (ISSO).
- Differentiate tasks and functions to ensure that no one person has sole access to or control over important resources.
- Protect all sensitive data entrusted to them as part of their government employment.
- Abide by all Department and Agency policies and procedures and guidelines related to ethics, conduct, behavior, and information technology (IT) information processes.

A.1.4 Confidentiality

RPMS users shall:

- Be aware of the sensitivity of electronic and hard copy information and protect it accordingly.
- Store hard copy reports/storage media containing confidential information in a locked room or cabinet.
- Erase sensitive data on storage media prior to reusing or disposing of the media.
- Protect all RPMS terminals from public viewing at all times.
- Abide by all Health Insurance Portability and Accountability Act (HIPAA) regulations to ensure patient confidentiality.

RPMS users shall not:

- Allow confidential information to remain on the PC screen when someone who is not authorized to that data is in the vicinity.
- Store sensitive files on a portable device or media without encrypting.

A.1.5 Integrity

RPMS users shall:

- Protect their systems against viruses and similar malicious programs.
- Observe all software license agreements.

- Follow industry standard procedures for maintaining and managing RPMS hardware, operating system software, application software, and/or database software and database tables.
- Comply with all copyright regulations and license agreements associated with RPMS software.

RPMS users shall not:

- Violate federal copyright laws.
- Install or use unauthorized software within the system libraries or folders.
- Use freeware, shareware, or public domain software on/with the system without their manager's written permission and without scanning it for viruses first.

A.1.6 System Logon

RPMS users shall:

- Have a unique User Identification/Account name and password.
- Be granted access based on authenticating the account name and password entered.
- Be locked out of an account after five successive failed login attempts within a specified time period (e.g., one hour).

A.1.7 Passwords

RPMS users shall:

- Change passwords a minimum of every 90 days.
- Create passwords with a minimum of eight characters.
- If the system allows, use a combination of alpha-numeric characters for passwords, with at least one uppercase letter, one lower case letter, and one number. It is recommended, if possible, that a special character also be used in the password.
- Change vendor-supplied passwords immediately.
- Protect passwords by committing them to memory or store them in a safe place (do not store passwords in login scripts or batch files).
- Change passwords immediately if password has been seen, guessed, or otherwise compromised, and report the compromise or suspected compromise to their ISSO.
- Keep user identifications (IDs) and passwords confidential.

RPMS users shall not:

- Use common words found in any dictionary as a password.

- Use obvious readable passwords or passwords that incorporate personal data elements (e.g., user's name, date of birth, address, telephone number, or social security number; names of children or spouses; favorite band, sports team, or automobile; or other personal attributes).
- Share passwords/IDs with anyone or accept the use of another's password/ID, even if offered.
- Reuse passwords. A new password must contain no more than five characters per eight characters from the previous password.
- Post passwords.
- Keep a password list in an obvious place, such as under keyboards, in desk drawers, or in any other location where it might be disclosed.
- Give a password out over the phone.

A.1.8 Backups

RPMS users shall:

- Plan for contingencies such as physical disasters, loss of processing, and disclosure of information by preparing alternate work strategies and system recovery mechanisms.
- Make backups of systems and files on a regular, defined basis.
- If possible, store backups away from the system in a secure environment.

A.1.9 Reporting

RPMS users shall:

- Contact and inform their ISSO that they have identified an IT security incident and begin the reporting process by providing an IT Incident Reporting Form regarding this incident.
- Report security incidents as detailed in the *IHS Incident Handling Guide* (SOP 05-03).

RPMS users shall not:

- Assume that someone else has already reported an incident. The risk of an incident going unreported far outweighs the possibility that an incident gets reported more than once.

A.1.10 Session Timeouts

- RPMS system implements system-based timeouts that back users out of a prompt after no more than 5 minutes of inactivity.

RPMS users shall:

- Utilize a screen saver with password protection set to suspend operations at no greater than 10 minutes of inactivity. This will prevent inappropriate access and viewing of any material displayed on the screen after some period of inactivity.

A.1.11 Hardware

RPMS users shall:

- Avoid placing system equipment near obvious environmental hazards (e.g., water pipes).
- Keep an inventory of all system equipment.
- Keep records of maintenance/repairs performed on system equipment.

RPMS users shall not:

- Eat or drink near system equipment.

A.1.12 Awareness

RPMS users shall:

- Participate in organization-wide security training as required.
- Read and adhere to security information pertaining to system hardware and software.
- Take the annual information security awareness.
- Read all applicable RPMS manuals for the applications used in their jobs.

A.1.13 Remote Access

Each subscriber organization establishes its own policies for determining which employees may work at home or in other remote workplace locations. Any remote work arrangement should include policies that:

- Are in writing.
- Provide authentication of the remote user through the use of ID and password or other acceptable technical means.
- Outline the work requirements and the security safeguards and procedures the employee is expected to follow.
- Ensure adequate storage of files, removal, and nonrecovery of temporary files created in processing sensitive data, virus protection, and intrusion detection, and provide physical security for government equipment and sensitive data.

- Establish mechanisms to back up data created and/or stored at alternate work locations.

Remote RPMS users shall:

- Remotely access RPMS through a virtual private network (VPN) whenever possible. Use of direct dial in access must be justified and approved in writing and its use secured in accordance with industry best practices or government procedures.

Remote RPMS users shall not:

- Disable any encryption established for network, internet, and Web browser communications.

A.2 RPMS Developers

RPMS developers shall:

- Always be mindful of protecting the confidentiality, availability, and integrity of RPMS when writing or revising code.
- Always follow the IHS RPMS Programming Standards and Conventions (SAC) when developing for RPMS.
- Only access information or code within the namespaces for which they have been assigned as part of their duties.
- Remember that all RPMS code is the property of the U.S. Government, not the developer.
- Not access live production systems without obtaining appropriate written access and shall only retain that access for the shortest period possible to accomplish the task that requires the access.
- Observe separation of duties policies and procedures to the fullest extent possible.
- Document or comment all changes to any RPMS software at the time the change or update is made. Documentation shall include the programmer's initials, date of change, and reason for the change.
- Use checksums or other integrity mechanism when releasing their certified applications to assure the integrity of the routines within their RPMS applications.
- Follow industry best standards for systems they are assigned to develop or maintain and abide by all Department and Agency policies and procedures.
- Document and implement security processes whenever available.

RPMS developers shall not:

- Write any code that adversely impacts RPMS, such as backdoor access, "Easter eggs," time bombs, or any other malicious code or make inappropriate comments within the code, manuals, or help frames.

- Grant any user or system administrator access to RPMS unless proper documentation is provided.
- Release any sensitive agency or patient information.

A.3 Privileged Users

- Personnel who have significant access to processes and data in RPMS, such as, system security administrators, systems administrators, and database administrators, have added responsibilities to ensure the secure operation of RPMS.

Privileged RPMS users shall:

- Verify that any user requesting access to any RPMS system has completed the appropriate access request forms.
- Ensure that government personnel and contractor personnel understand and comply with license requirements. End users, supervisors, and functional managers are ultimately responsible for this compliance.
- Advise the system owner on matters concerning information technology security.
- Assist the system owner in developing security plans, risk assessments, and supporting documentation for the certification and accreditation process.
- Ensure that any changes to RPMS that affect contingency and disaster recovery plans are conveyed to the person responsible for maintaining continuity of operations plans.
- Ensure that adequate physical and administrative safeguards are operational within their areas of responsibility and that access to information and data is restricted to authorized personnel on a need-to-know basis.
- Verify that users have received appropriate security training before allowing access to RPMS.
- Implement applicable security access procedures and mechanisms, incorporate appropriate levels of system auditing, and review audit logs.
- Document and investigate known or suspected security incidents or violations and report them to the ISSO, Chief Information Security Officer (CISO), and systems owner.
- Protect the supervisor, superuser, or system administrator passwords.
- Avoid instances where the same individual has responsibility for several functions (i.e., transaction entry and transaction approval).
- Watch for unscheduled, unusual, and unauthorized programs.
- Help train system users on the appropriate use and security of the system.

- Establish protective controls to ensure the accountability, integrity, confidentiality, and availability of the system.
- Replace passwords when a compromise is suspected. Delete user accounts as quickly as possible from the time that the user is no longer authorized system. Passwords forgotten by their owner should be replaced, not reissued.
- Terminate user accounts when a user transfers or has been terminated. If the user has authority to grant authorizations to others, review these other authorizations. Retrieve any devices used to gain access to the system or equipment. Cancel logon IDs and passwords and delete or reassign related active and backup files.
- Use a suspend program to prevent an unauthorized user from logging on with the current user's ID if the system is left on and unattended.
- Verify the identity of the user when resetting passwords. This can be done either in person or having the user answer a question that can be compared to one in the administrator's database.
- Shall follow industry best standards for systems they are assigned to and abide by all Department and Agency policies and procedures.

Privileged RPMS users shall not:

- Access any files, records, systems, etc., that are not explicitly needed to perform their duties.
- Grant any user or system administrator access to RPMS unless proper documentation is provided.
- Release any sensitive agency or patient information.

Contact Information

If you have any questions or comments regarding this distribution, please contact the IHS IT Service Desk.

Phone: (888) 830-7280 (toll free)

Web: <https://www.ihs.gov/itsupport/>

Email: itsupport@ihs.gov

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