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**CareConnect Bake-Off:
System Integration, not Standardization**

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ABSTRACT

In contrast to other electronic health record strategies that are built on standardization and often replacement of systems, Care Connect reflects a philosophy of integration of existing systems rather than replacement. CareConnect consists of two major components: the Patient Encounter Index and Links to specific patient information and allows care providers with access to all the systems through a single port of entry through the use of CCOW technology.

In this presentation, we will reflect on the development of the CareConnect project, which was influenced partly by initial budgetary constraints, as well as our responsiveness to initially less than expected utilization.

We will describe how limited resources insured that an incremental approach to system development and implementation were taken. When responsiveness to early components was than what had been anticipated, our team develop a strategy for identifying barriers to success, and for acting on what we heard from users. Insights gained from our “low budget” experience informed our long-term strategy, which has as a central component integrated access to multiple systems, rather than access alone.

A technology “bake-off” strategy was used to determine the merits and shortcomings of technical infrastructures. Our decision to integrate rather than standardize reflected a number of factors including economics of a large install base of legacy systems, and the load that a single implementation would place on a single provider.

ABOUT THE AUTHOR

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Chris Clement is the Regional Manager for Telehealth and the Clinical Lead on the CareConnect Project. For the last four years Chris had been actively working on the Electronic Patient and Health Record in Vancouver Coastal. She has also participated in the Provincial Provider Registry Initiative, which is a key component of the British Columbia Electronic Health Record. She was in involved as a founding member of the former BC Nursing Informatics group, COACH Nursing Informatics and, more recently the CNIA.