

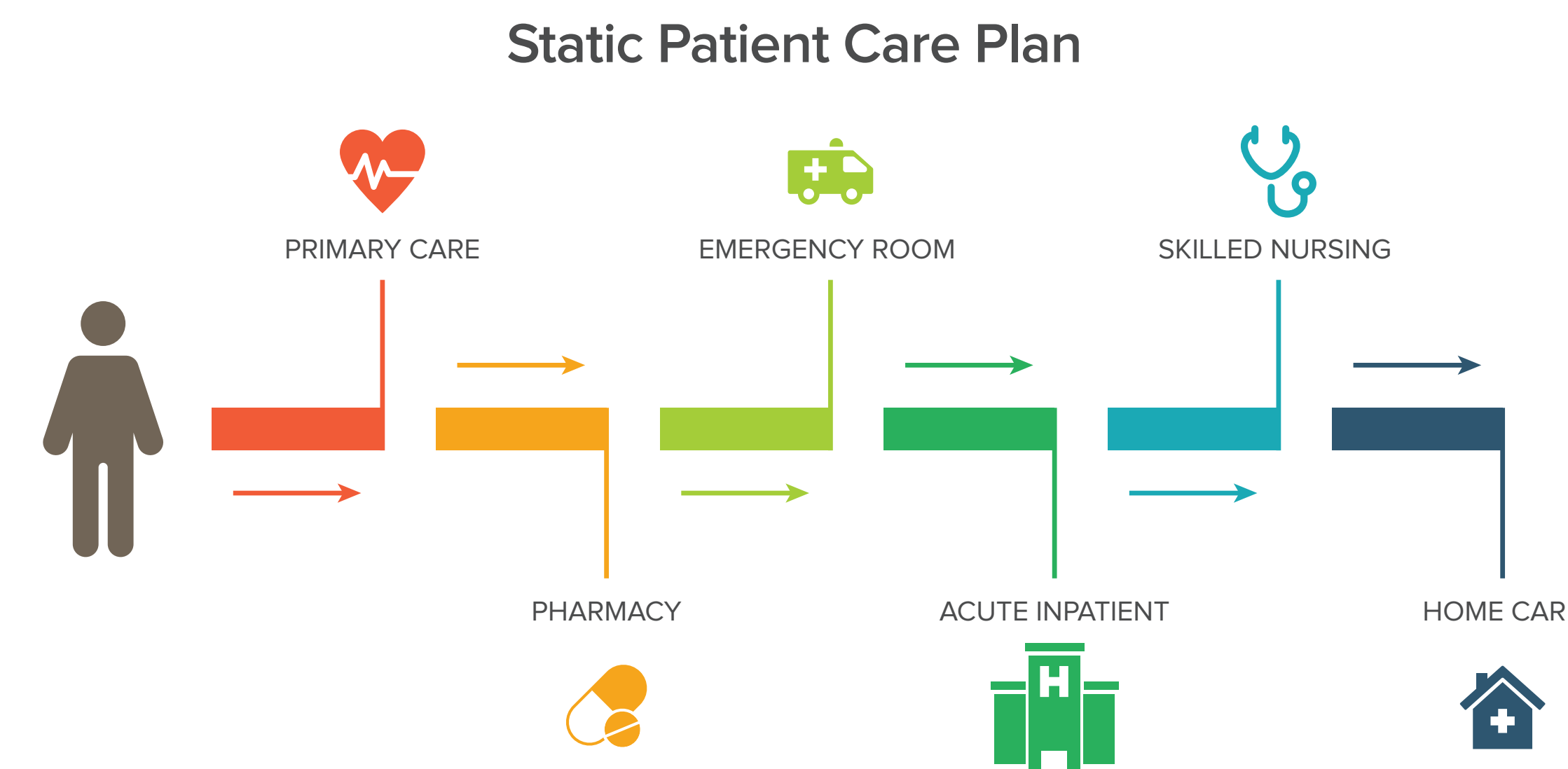
eCare Plans — Nurse Informaticist Role as an Advocate

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CURRENT STATE

Static, Single Context:

The patient information represents the single point in time of a patient encounter. A static eCare Plan is not intended to represent a longitudinal eCare Plan. The static eCare Plan can be shared with other clinicians and care teams.



eCare Plan Structure

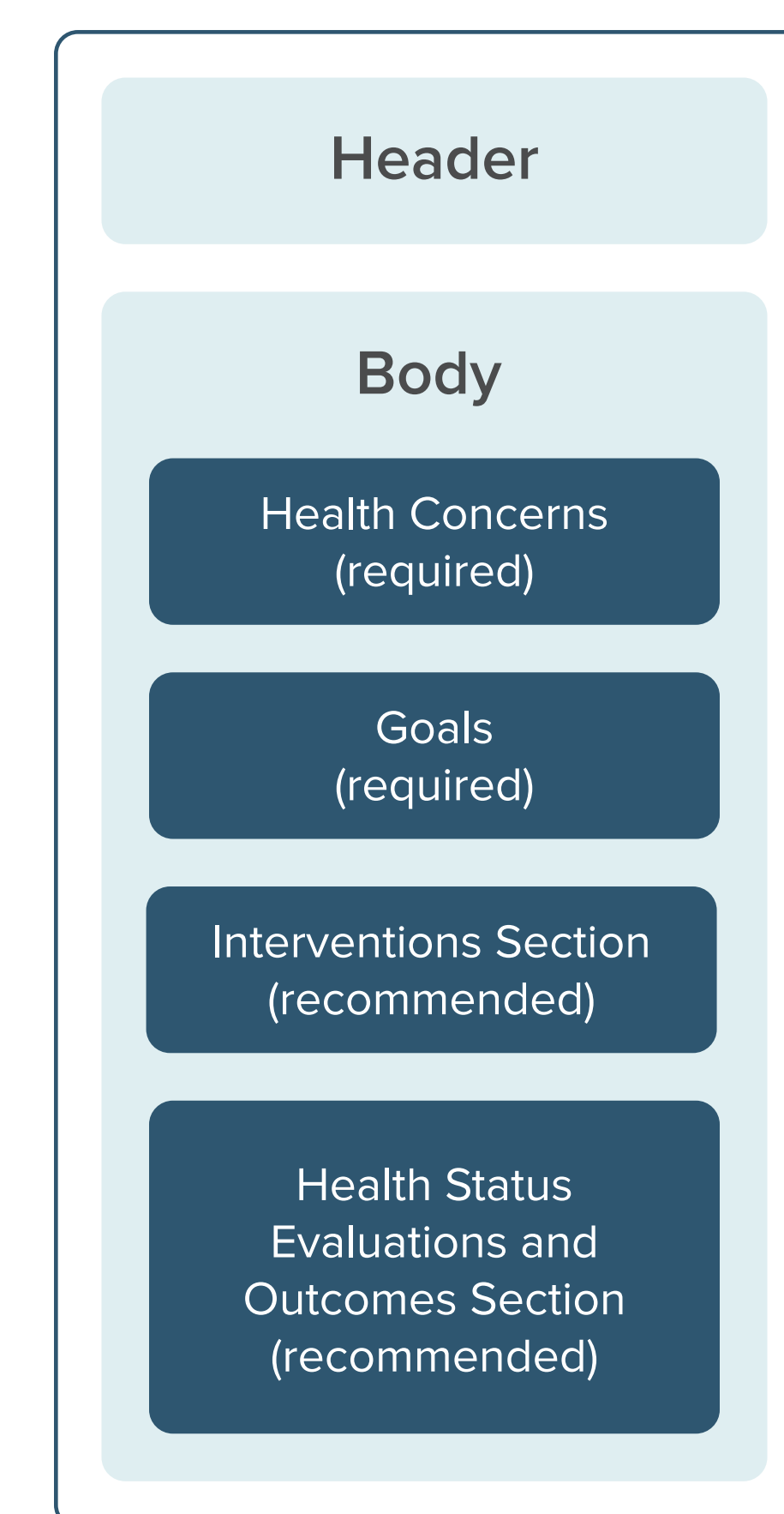
An eCare Plan Document includes two main parts: a header and body. The header contains patient demographic and service details (e.g., organization name, clinicians). Within the body, the document contains four sections: health concerns, goals, interventions and health status evaluations and outcomes section.

Health Concerns Section: This section contains information that may require attention, intervention, or management. It covers any concern or related matter of interest to the patient, family, or healthcare provider. Health concerns may come from a variety of sources within an EHR, such as the Problem List, Family History, and Social History.

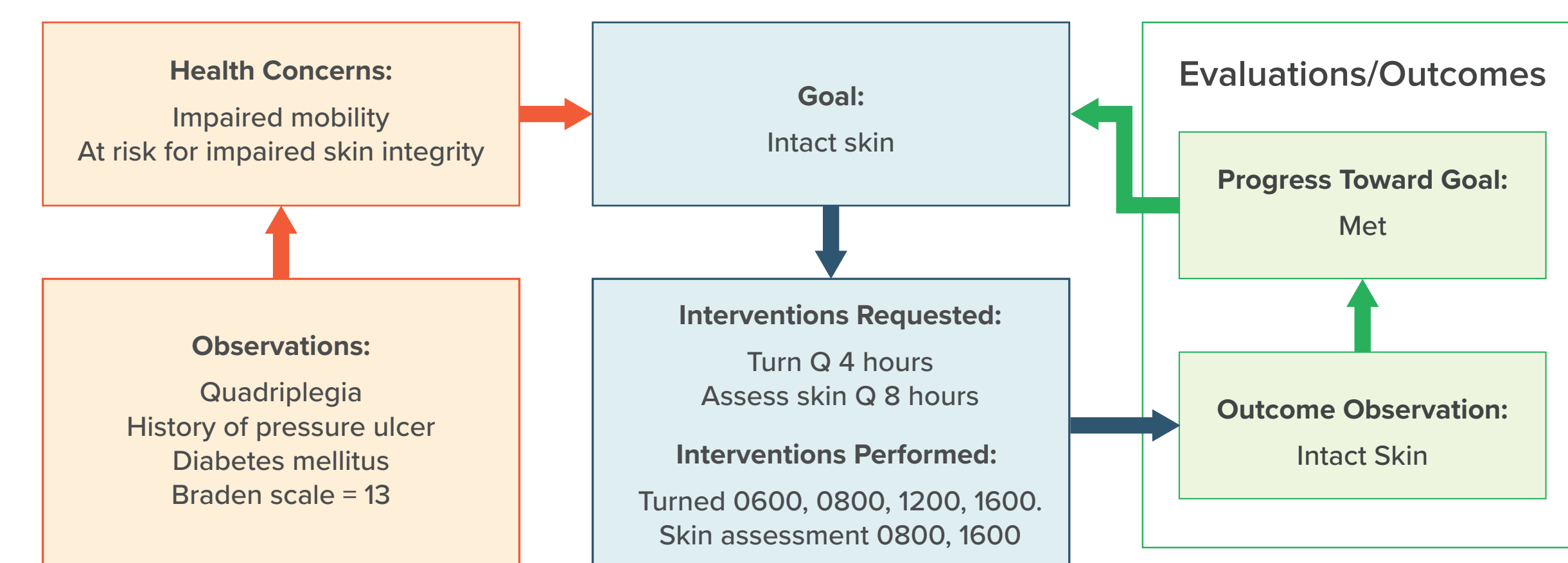
Interventions Section: This Section contain an individual interventions. Interventions are actions that maximize the prospects of achieving the goals of care. Interventions are planned, ordered, or historical. Interventions include ongoing actions (e.g., monitoring of chronic medications, routine lab orders). This section may also include details on medication instructions, care instructions, and communication information for facility transfers.

Goals Section: This section contains an individual goals. A goal is a desired outcome or condition in the process of patient care (e.g., alleviation of health concerns, desired/intended positive outcomes from interventions, longevity, function, symptom management, or comfort).

Health Status Evaluations and Outcomes Section: This section allows the clinician to document their observations on patient outcomes and progress or achievement of outlined goals as a result of the recommended interventions.



Example of eCare Plan Section Relationship



Benefits of eCare Plans

- Timeliness
- Ease of Sharing
- Promotion of patient care coordination
- Improvement in quality of patient care

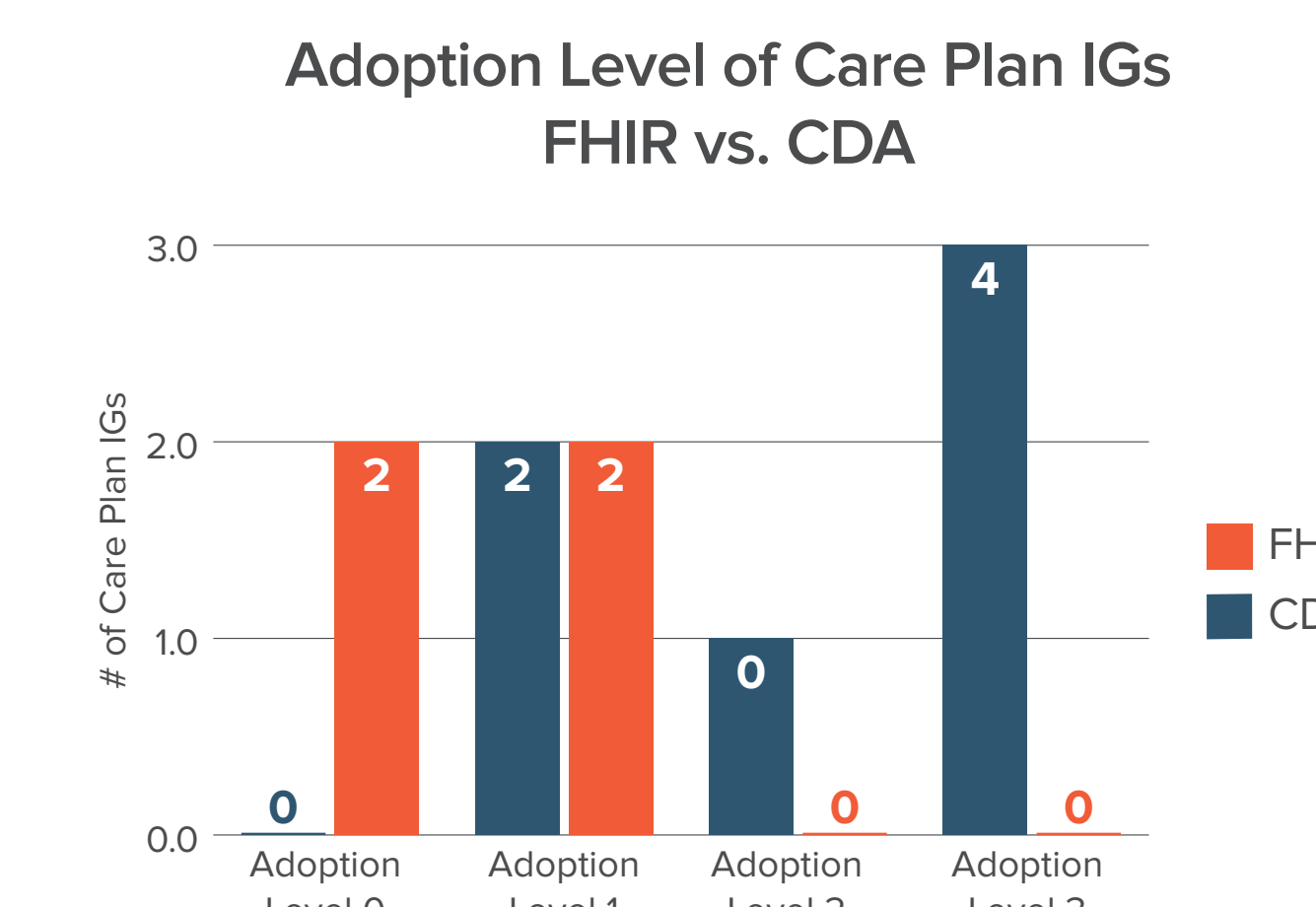
ADOPTION

Lantana Consulting Group was awarded a High Impact Pilot (HIP) grant to develop standard eCare Plans for pharmacists to deploy across the Community Pharmacy Enhanced Services Network (CSPEN), a project of Community Care of North Carolina (CCNC). The pilot resulted in the development of two HL7 standard exchange formats for vendor implementation:

- CDA
- FHIR

Standards Adoption

The Office of the National Coordinator for Health Information Technology's Interoperability Standards Advisory (ISA) contains guidance to stakeholders and vendors regarding standards available for interoperability. The Care Plan section in the ISA contains information about the adoption of eCare Plan implementation guides (IGs) for either FHIR or CDA.



Industry Adoption

At least 16 vendors have adopted one or more of the electronic Care Plans. These vendors represent pharmacy management systems either embedded or integrated into a clinical document system or a clinical document system itself.

Pharmacist eCare Plan Functionality Active in the Marketplace

12 Technology Companies with eCare Plan Active in the Marketplace

BestRx, Liberty, PioneerRx, assurecare, MICRO, Pharmathx, DocStnk, QS/1, STRAND, PrescribeWellness

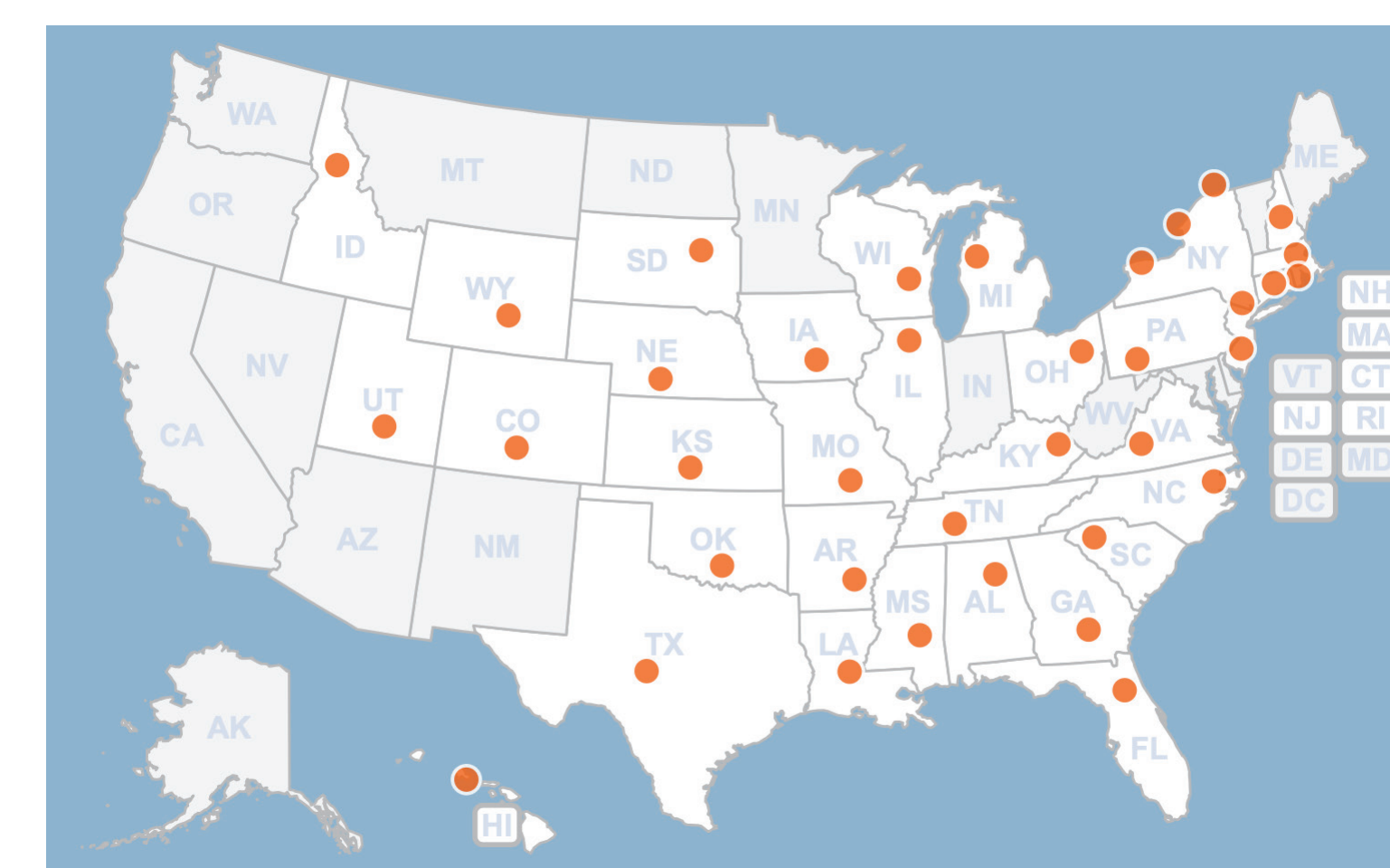
4 Technology Companies with eCare Plan Active in the Marketplace via Integration

Amplicare, ComputerRx, MCKESSON, FRED

Technology Companies Building eCare Plan Functionality: Azovz, Cost Effective Computers, Digital Business Solutions, DocStation, Habitrui, Kloudscript, Mobile Mediclaim

Network of Community-Based Pharmacies

Location of members of the Community Pharmacy Enhanced Services Network (CPESN) pharmacies are shown below. These pharmacies support training for the use of the Pharmacist eCare Plan.



NURSE INFORMATICIST

How Nurse Informaticists Contribute to eCare Plan Development:

- Development of testing use cases/scenarios
- Provide experience around clinical workflow (e.g. bottlenecks, potential solutions)
- Takes information learned from patients and integrate to standards development
- Advise on how to optimize the eCare Plan based on the different forms of patient/family participation (e.g., actively involved in decision making, health literacy, empowering family, computer savvy)
- Collaboration with standards developers—share knowledge, skills, and information on impact and patient outcomes
- Participate or lead stakeholder workgroup call related to eCare Plan development
- Provide education and training nursing care planning and process

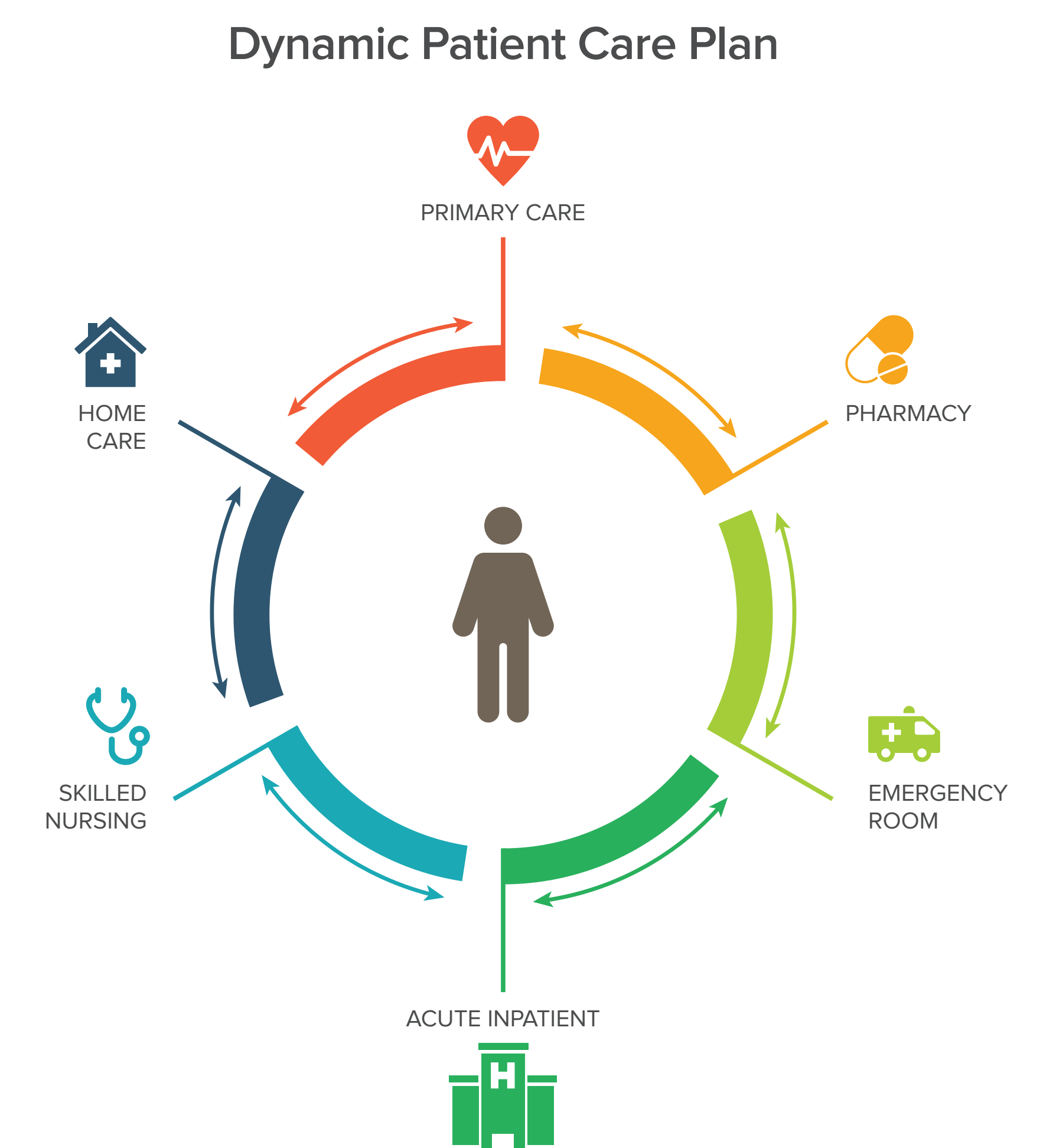


FUTURE STATE

Dynamic, Multiple Contexts:

The care plan is dynamically updated as the patient interacts with different care clinicians. The dynamic eCare Plan meets the need for sharing care plan data with multiple clinicians (and payers). No assumption of a single care plan for an individual.

Dynamic care planning has highlighted the need to identify/define who governs/owns the data. These discussions are underway.



Next Steps

Nurse Informaticists are in the ideal position to advocate for the continued development and adoption of eCare Plans from the static to the dynamic state.

