

Project Title:	Service Integration
Principal Investigator:	Mathews, Craig A.
Organization:	Franklin Foundation Hospital
Mechanism:	RFA: HS05-013: Limited Competition for AHRQ Transforming Health Care Quality Through Information Technology (THQIT)
Grant Number:	UC1 HS 016151
Project Period:	09/05 – 09/08
AHRQ Funding Amount:	\$1,500,000
Summary Status as of:	September 2008, Conclusion of Grant

Strategic Goal: Develop and disseminate health IT evidence and evidence-based tools to support patient-centered care, the coordination of care across transitions in care settings, and the use of electronic exchange of health information to improve quality of care.

Business Goal: Implementation and Use

Summary: The Bayou Teche Community Health Network (ByNet) partnered with Franklin Foundation Hospital, a critical access hospital, in this project to establish an integrated clinical and human services health information exchange (HIE) for public and private health service providers of residents of St. Mary and surrounding parishes in the State of Louisiana. Safety net providers serving this target area committed in-kind administrative time and information technology (IT) staff to complete an intensive 3-year implementation process. Observations of committee meetings, review of reports, survey of project partners, and interviews with key stakeholders all indicate a significant level of community support for the Service Integration effort. Further, participants indicated that the planning process was effective and believe that the project has the potential to create an effective system across safety net providers for sharing some forms of clinical information. ByNet has developed an HIE allowing caregivers within its immediate collaborative network a summarized view of a patient’s recent health history. Although the system is not yet live, other sources of funding have been secured. The initial phase of the implementation will allow authorized caregivers an online view of a patient’s demographic details and recent encounters, including the dates and locations with narrative diagnoses and procedures. This patient information will be printable as a PDF and can easily be attached to a paper chart to support a care episode. As additional patient care occurs in the ByNet community, the patient’s demographics and encounters will be updated to reflect this new information. System launch date is outside the scope of this grant but is still proceeding, as other sources of funding have been secured. Initially, the system will have major functions intact, with more features planned for the future.

Specific Aims

- Develop a robust governance structure for ByNet. **(Achieved)**
- Link existing electronic information systems from a variety of partner organizations, including clinics, laboratories, and the State office of public health, to a common data repository. **(Ongoing*)**
- Create a Master Patient Index and system program needed to export and import data from project partner systems. **(Achieved)**
- Go live with Local Health Information Infrastructure sharing of relevant clinical and administrative data across ByNet sites. **(Upcoming*)**
- Continue to support individual ByNet partners in moving to electronic records, and interface new information sources to the repository as they come on line. **(Upcoming*)**
- Make enhancements that could include computerized physician order entry, referral tracking, links to eligibility screening, and network-wide scheduling. **(Upcoming*)**

- Build and implement the automatic “required disease reporting” component. **(Upcoming*)**

* Several aims of the grant were not completed prior to the scheduled conclusion of the grant (September 2008), yet, as other sources of funding have been secured, these aims are still targeted for completion.

2008 Activities: Users were trained for the system, and a go-live date was set. Patient consent and information security documents were prepared.

Impact and Findings: To date, four partners have officially signed a memorandum of understanding (MOU) and have been actively engaged in the data-sharing process. Two additional partner sites are in position to sign the MOUs, namely the Louisiana State University’s Charity System, which encompasses the Leonard J. Chabert and University Medical Centers. The exigencies associated with Hurricanes Katrina and Rita previously, and with Hurricanes Gustav and Ike more recently, caused a significant delay in getting the legal department of the Louisiana State University Health Sciences Center to finalize the agreement. The delay is not considered to be problematic as the technical and leadership components of those organizations continue to work constructively with the project. The ByNet organization has submitted two grant applications to continue implementation work and hopefully make the HIE self-sustaining. The first is the Project Outreach application, which has been submitted to the Louisiana State Access Initiative. The purpose of the proposed project is to expand ByNet’s existing efforts to increase access to prescription drugs for under- and uninsured residents of the St. Mary, Iberia, Vermilion, and Terrebonne Parish region. This task will be met through partnerships with various entities and providers, which will allow patients enhanced access to a broader variety of prescription assistance opportunities. Additionally, ByNet will expand its services to target the younger, nontraditional working class, low-income, and the under- and uninsured population not directly targeted in the past. ByNet is requesting a sum total of \$50,000 in State of Louisiana funding for the purpose of implementing the proposed project. The second, funded application is to the Department of Health and Human Service’s Health Resources and Services Administration as part of the *Rural Health Care Services Outreach Grant Program*. The funding amount is for \$375,000 and for the period of May 1, 2006, through April 30, 2009.

Selected Outputs

ByNet Business Associate HIPAA Agreement; Governance Document; ByNet Governance Committee/Board of Directors (Including Franklin Foundation Hospital).

ByNet HIE Governance Committee Operating Guidelines; Governance Document; ByNet Governance Committee/Board of Directors (Including Franklin Foundation Hospital).

ByNet Memorandum of Understanding; Governance Document; ByNet Governance Committee/Board of Directors (including Franklin Foundation Hospital).

ByNet OpenHRE Architecture Design Document; Governance Document; ByNet Governance Committee/Board of Directors (Including Franklin Foundation Hospital).

ByNet OpenHRE Patient Finder Training Manual, Version 1.0; Governance Document; ByNet Governance Committee/Board of Directors (Including Franklin Foundation Hospital).

ByNet Patient Consent Form; Governance Document; ByNet Governance Committee/Board of Directors (Including Franklin Foundation Hospital).

Grantee’s Most Recent Self-Reported Quarterly Status (as of September 2008): The THQIT grant from the Agency for Healthcare Research and Quality has been completed, but the project continues. Implementation of an HIE has required more time than initially expected, in part due to natural disasters and other adverse events outside of the project’s control, but system implementation is continuing with funding from other sources.

Milestones: Progress is mostly on track.

Budget: On target.