

Knowledge Integration: The IAIMS Experience at LVH.

Donald L. Levick MD

Lehigh Valley Health Network, donald.levick@lvhn.org

Linda M. Schwartz MDE, AHIP, CM

Lehigh Valley Health Network, linda_m.schwartz@lvhn.org

Bryan G. Kane MD

Lehigh Valley Health Network, bryan.kane@lvhn.org

Follow this and additional works at: <http://scholarlyworks.lvhn.org/administration-leadership>



Part of the [Business Administration, Management, and Operations Commons](#), [Health and Medical Administration Commons](#), and the [Management Sciences and Quantitative Methods Commons](#)

Published In/Presented At

Levick, D. L., Schwartz, L. M., Kane, B. G. (2007, October 1). *Knowledge Integration: The IAIMS Experience at LVH*. Presented at: Lehigh Valley Health Network, Allentown, PA.

This Presentation is brought to you for free and open access by LVHN Scholarly Works. It has been accepted for inclusion in LVHN Scholarly Works by an authorized administrator. For more information, please contact LibraryServices@lvhn.org.



Knowledge Integration: The IAIMS Experience at LVH

The IAIMS Planning Grant at LVH
Integrated Advanced Information Management Systems



Agenda

- What is IAIMS – Don Levick, M.D., MBA
- The Digital Library – Linda Schwartz, MDE
- EPOC at LVH – Bryan Kane, M.D.
- Clinical Decision Support – Don Levick



What is IAIMS?





What is the IAIMS Grant?

- Planning Grant from National Library of Medicine awarded to LVH and the Information Services Department
- Total of \$150,000
- Used to plan interdisciplinary efforts within and outside of I.S. to align clinical information and data with Network strategic vision



IAIMS: Definition

- A managed, networked information environment whose dimensions are dictated by the organization's strategic plan
- The IAIMS environment integrates diverse resources and services to deliver convenient and comprehensive access to information
- Seamlessly integrating an institution's own information resources with relevant information obtained from sources outside the organization



The Case for IAIMS

- Progress has been slow in the area of organization change to support information management within and between healthcare organizations
- How best to draw from the common information space the right subset of information and present in the most useful and understandable way



Examples

- Research and Education: delivering research information to consumers that supports personal health decisions about participation in a clinical trial
- Education and Healthcare: creating clinical cases in real-time for use in education



Examples

- Tufts University: partnership with NE Med Center based on shared information network; clinical research database; image database; new organization model for managing information resources
- Vanderbilt University: new strategic alliances for development of commercial software; creation of university-wide Information Architect

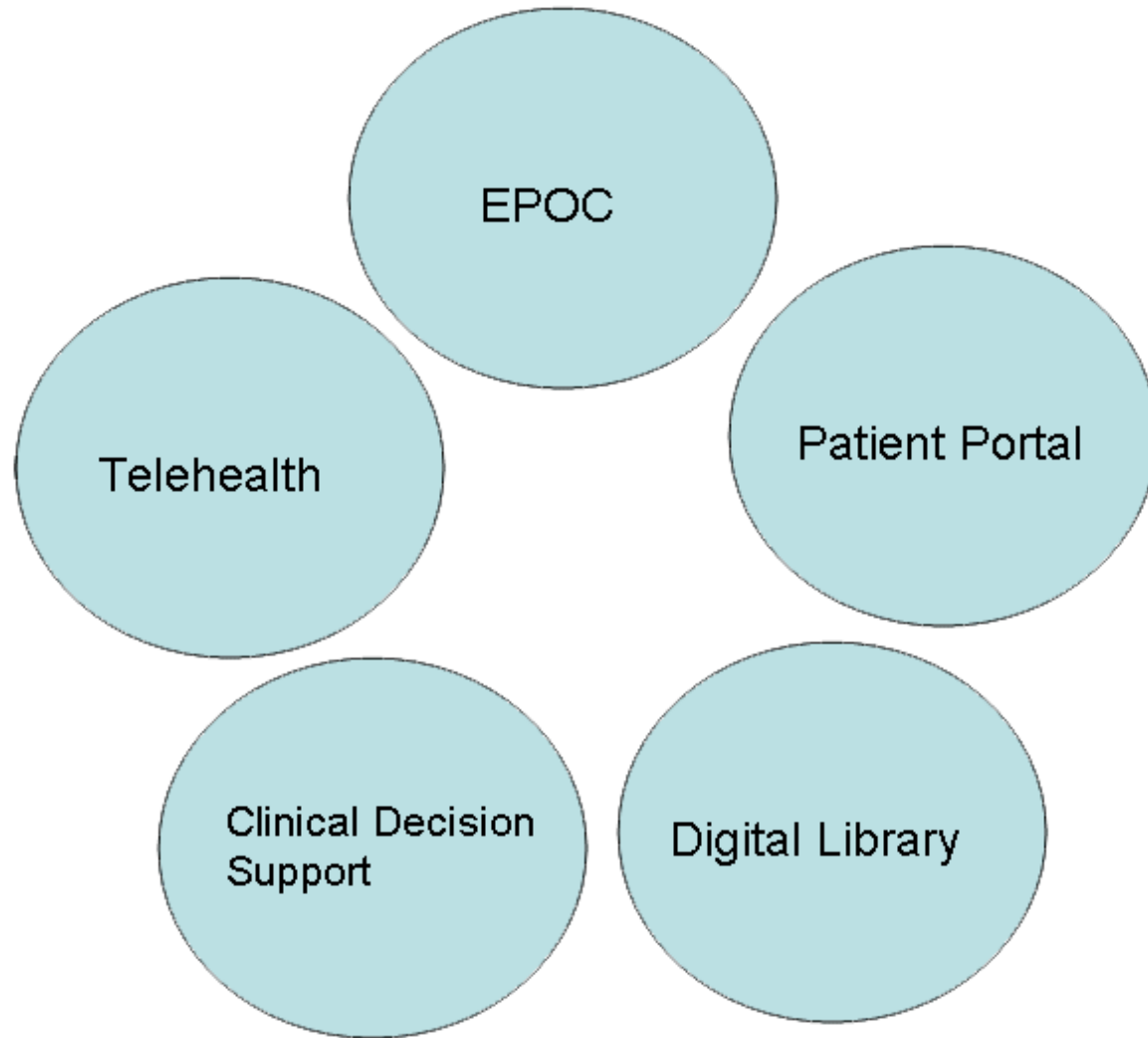


Examples

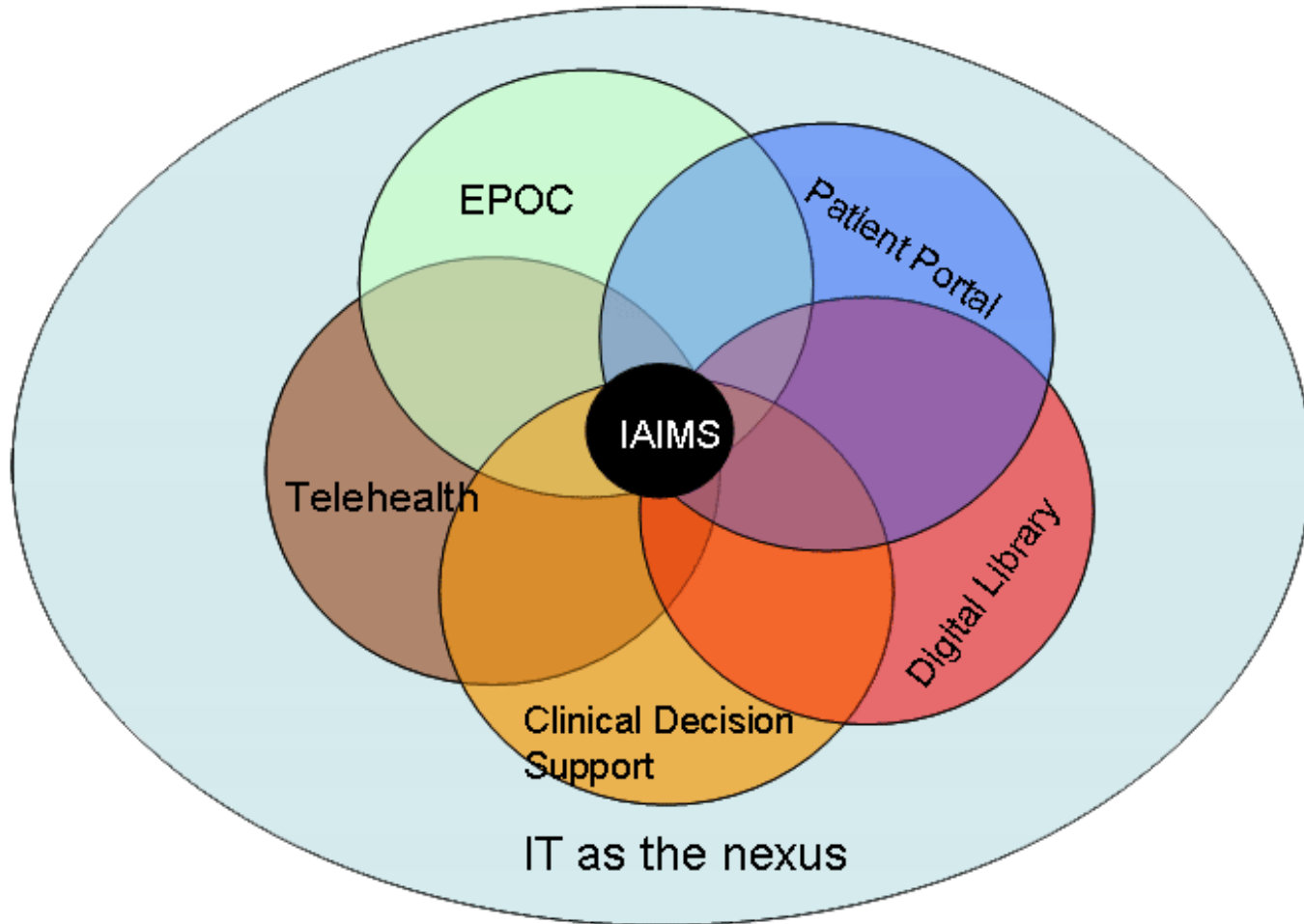
- University of Pittsburgh: introduced campus-wide online access to health sciences library; developed a 'Clinical Event Monitor' for Clinical Decision Support (CDS); faculty research database; physician-friendly querying tool for network data warehouse

- Five areas of concentration:
 - Digital Library
 - Clinical Decision Support
 - Telemedicine
 - Evidence at the Point-of-Care
 - Patient Portals

Pre-IAIMS Information Integration



Ultimate Goal for Integration





IAIMS Activities

- Multidisciplinary meetings
- New collaborations
- Increased awareness of digital resources within the hospital
- Collaboration with other IAIMS institutions
- Potential collaboration with Columbia University Hospital



IAIMS Activities

- Sponsoring on-site training of EPOC by University of Virginia
- Domain members sponsored for educational activities
- Multidisciplinary group working to prioritize the expert rules and other forms of clinical decision support



IAIMS Fundamental Requirements

- Involvement of all stakeholder organizations at the institution in the development of the plan
- Creation of a plan that addresses the needs of stakeholders in basic mission areas, such as education, research, clinical healthcare and administration



Institutional Success Factors

- Institutional culture is supportive
 - Committed to IAIMS
- In-house expertise
 - I.S. and library staff
- Financing
- Organization and Management
 - Overlap of committees (for info sharing)
- Programs and Partnerships
 - Working relationships among groups
- Systems and Standards
 - Consistency of systems, hardware, data standards

Features of an IAIMS Organization

- An information management plan
- An organizational mechanism for coordinating the management and development of the enterprise's information infrastructure
- Stakeholder involvement in planning
- Unified and remote access to the institution's network-based information resources
- Technology to enable the application of knowledge – to improve health, to enable good decisions, to enhance learning, to aid discovery and innovation



Beneficial Effects of IAIMS

- A change in the way participants think about information networks and resources
- Direct involvement: participation in groups
- Secondary involvement: increasing I.S. related knowledge base and skills of participants
- New collaborations within the organization were formed
- Organizational changes resulting in more coordinated planning, budgeting and implementation of information systems



END





Integrating Evidence Based Resources to Support Patient Safety

Linda Matula Schwartz, MDE, Information Specialist





Information Domains

Clinical Decision Support

Digital Library

EPOC

Patient Portal

Telehealth

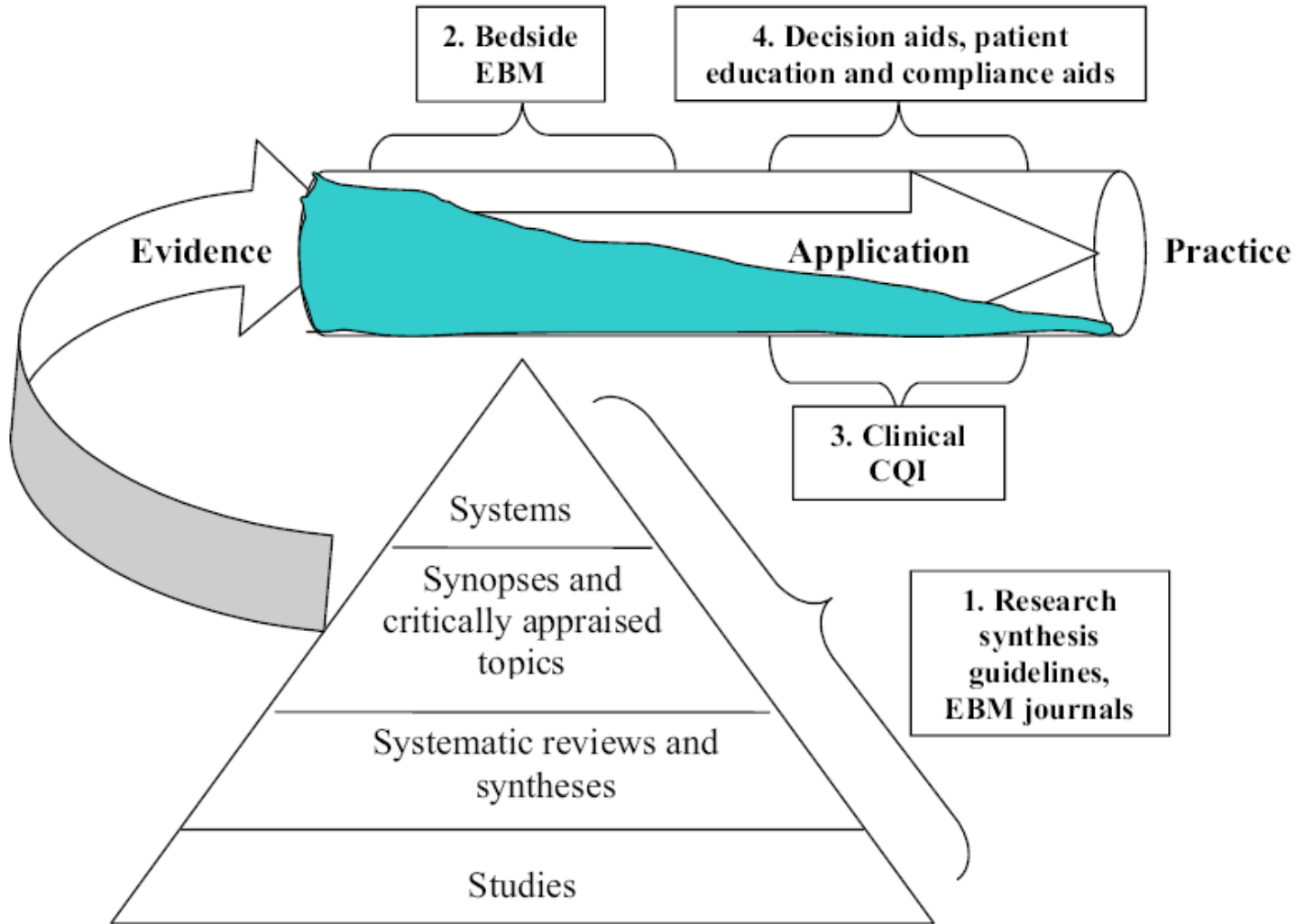


Knowledge Translation

Using research, education, quality improvement and electronic systems development to facilitate the transfer of high quality evidence from research to clinical practice in order to

- reduce errors
- increase use of proven knowledge
- decrease use of inappropriate therapies

Moving from Awareness to Adherence





Digital Library Mission

1. Identification of appropriate knowledge-based information (KBI) products
 - o **Bibliographic Databases**
 - o **Evidence Based Content**
 - o **Electronic Books and Journals**
 - o **Clinical Calculators and Decision Support Tools**
 - **Pediatric weight-based dosing calculator**
 - o **Clinical Guidelines from Professional Organizations**
 - o **Consumer Health content**
 - o **Expert Rules/Core Measure Programs**
 - o **Medical Images**

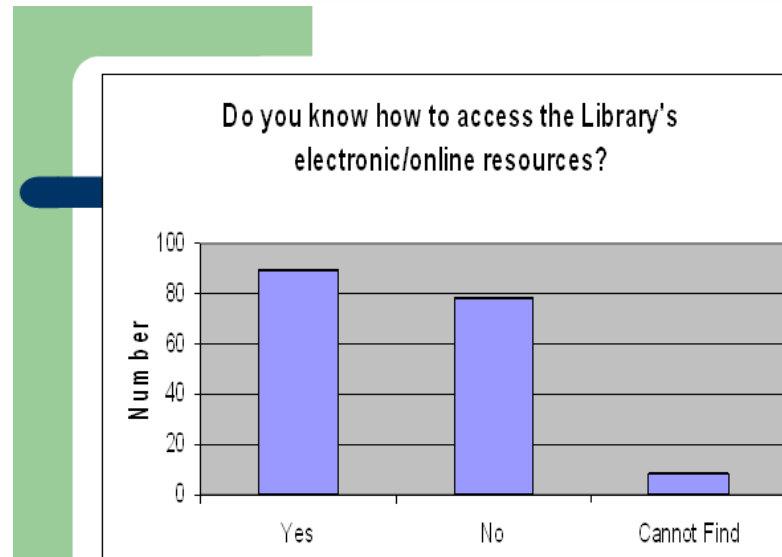


Digital Library Mission

2. Plan for content evaluation process of KBI programs
 - Identify key stakeholders in clinical areas to act as content evaluators

Digital Library Mission

3. Education on use of KBI programs accessible through the Digital Library

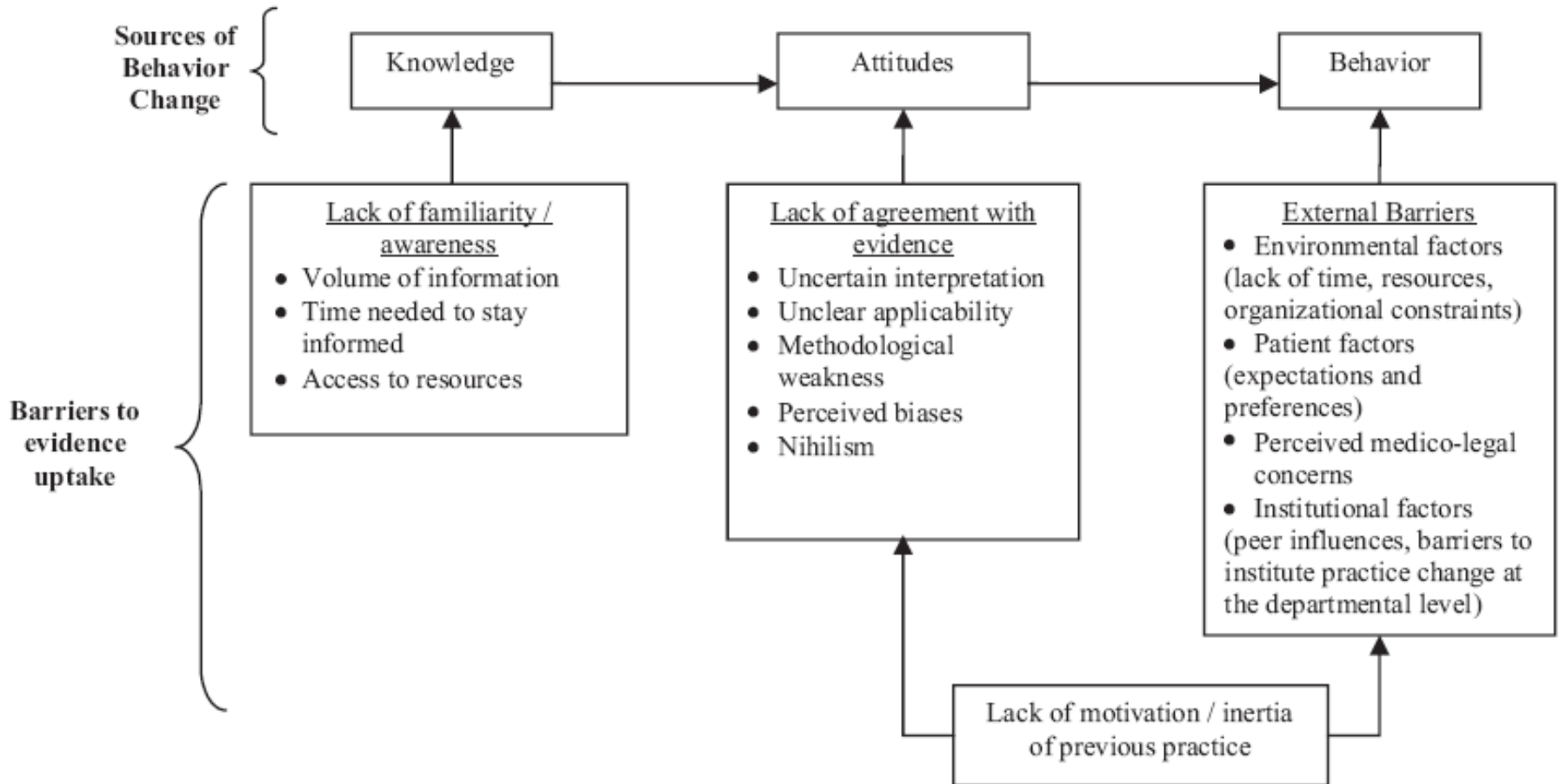




Survey Results: Common Issues for KBI Domains

- Lack of knowledge about what resources are available
- Ease of access to resources
- Speed of getting results
- Education on how to use resources
- Access to full text – especially PDFs
- Information specific to specialty areas

Barriers to Adherence



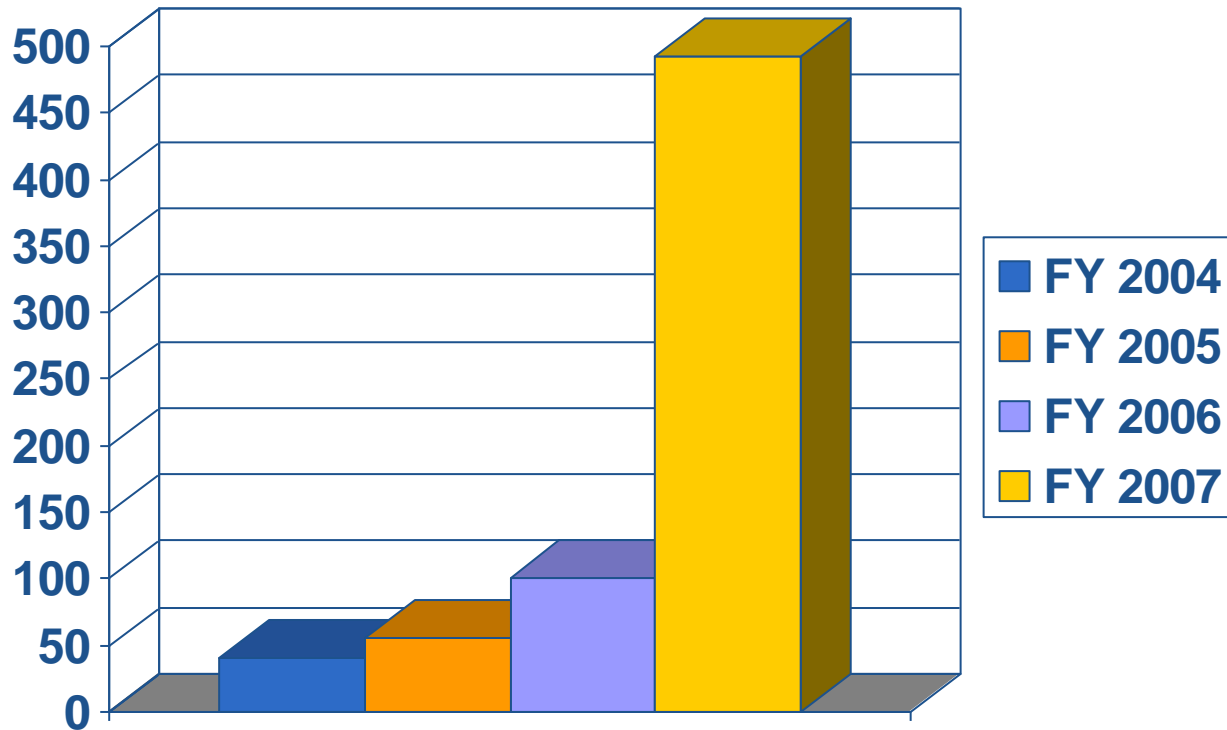


Digital Library Mission

3. Education on use of KBI programs accessible through the Digital Library
 - Joint EBPx workshops with Nurse Researcher
 - Meetings with clinical teams for EBM projects
 - Orientations for new residents
 - Creation of online tutorials and program guides



Increased Training





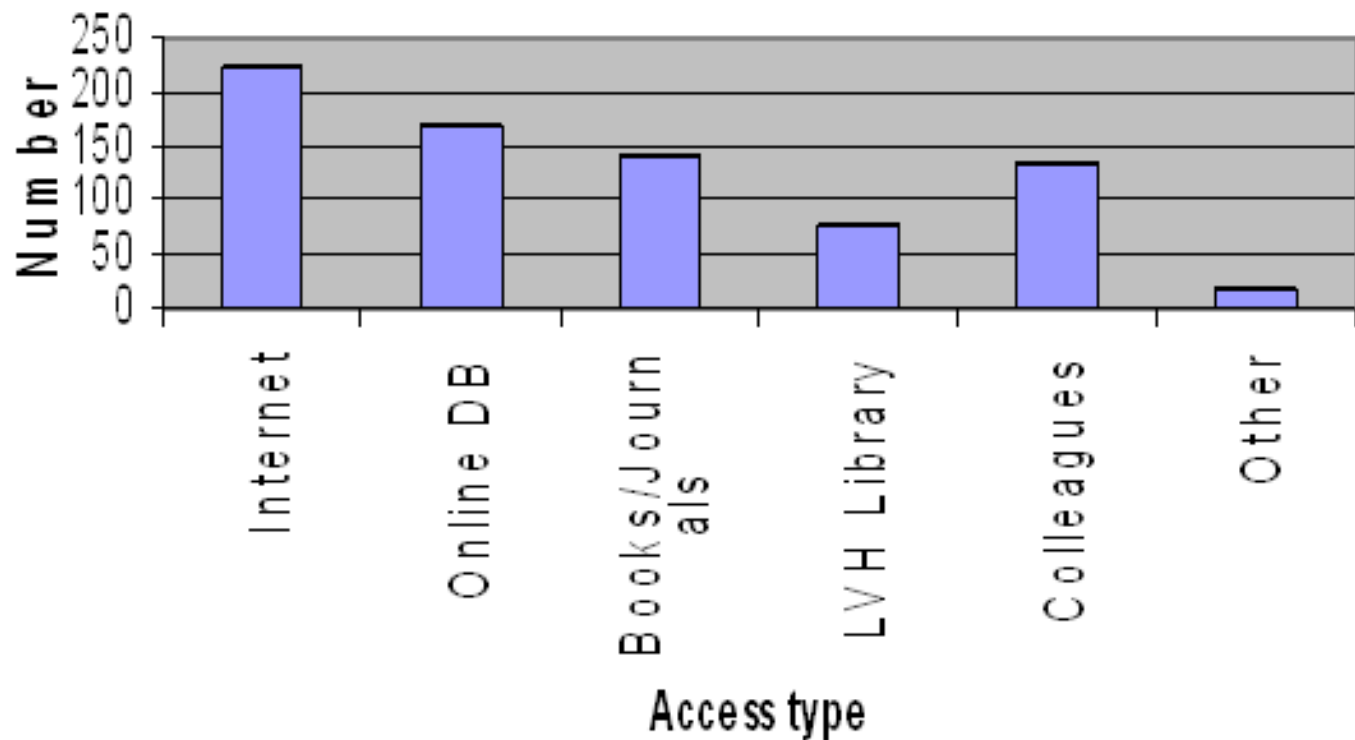
Digital Library Mission

4. Identification of a seamless interface to organize access to multiple KBI resources including POC access

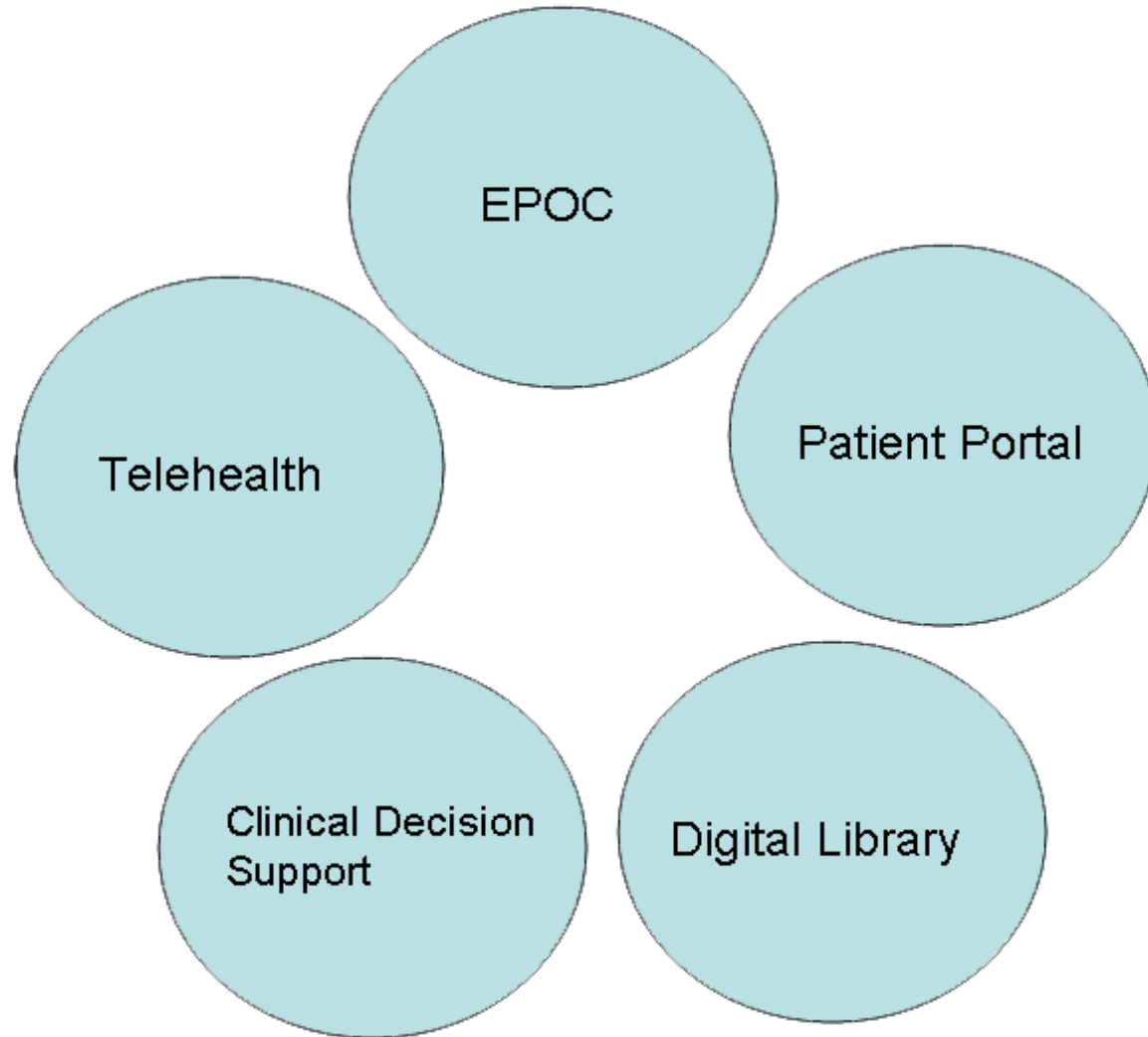
- **VISIBILITY!** – Library website, branding
- Conversion of print to electronic access
- A-Z Journal List
- Electronic book list by subject
- Electronic Current Awareness Program
- Creation of subject guides by specialty
- InfoButtons Technology
- Federated Search Tools

Survey Results

Where do you go to meet your info needs?

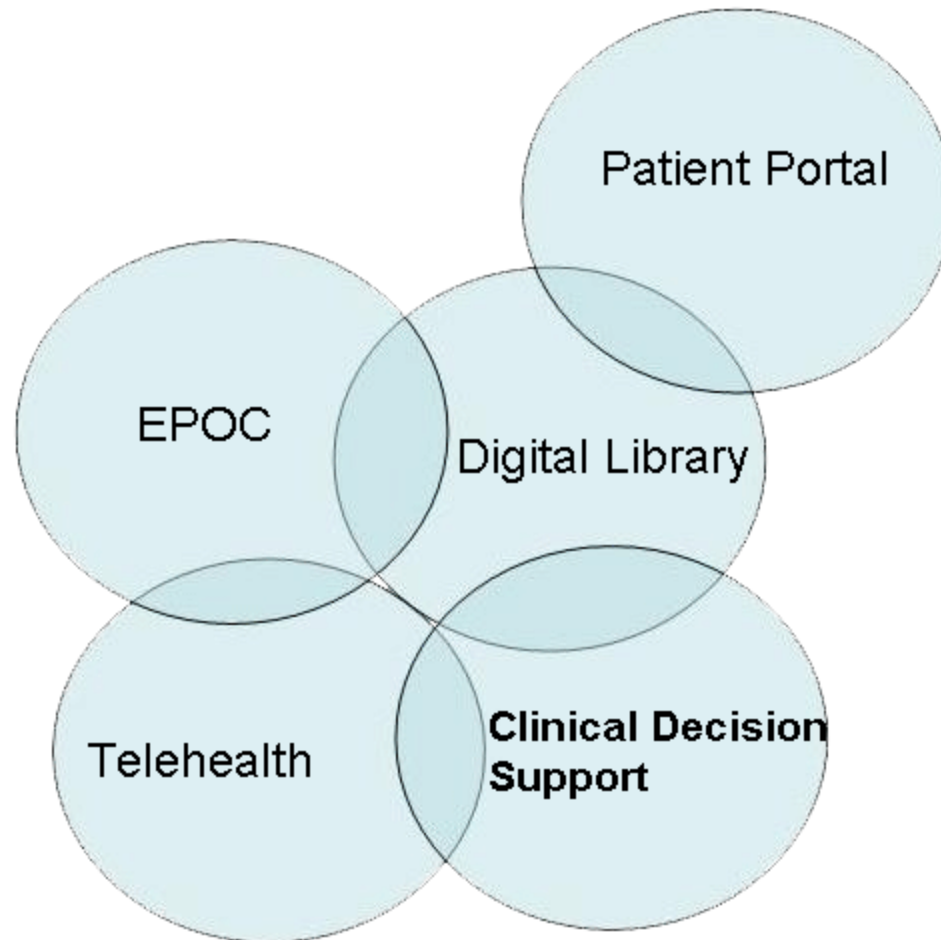


Pre-IAIMS Information Integration





IAIMS Integration at 6 Months: Library as Pivotal Content Source for Three Domains





Seamless Integration Interface

Features

- **Ability to integrate a variety of KBI content at POC**
- **Ability to harvest context (patient, provider, institution) from CAPOE/EHMR**
- **Ability to tailor the resources offered to a user based on context**
- **Cross platform access – desktop, handheld, wireless**



Key Factors for Investigation of InfoButtons

- Identification of leading edge research projects
- Identification of a trend in vendor initiatives
- Literature review
- Discovery of proposed status as NISO HL7 interoperability standard for exchanging data with CAPOE/EHMR
- Discovery that GE/IDX (CareCast) is currently investigating an InfoButton interface
- Evidence of success – Columbia NY Presbyterian and Intermountain HC, Kaiser Permanente
- Opportunity to partner with leading expert

Capability of requesting librarian assistance from POC – Recommendation from Clinical Decision Support domain

Context triggered clinical images to support clinical care

With a seamless interface, mining the log data for provider context from the search queries could be beneficial as an indicator of:

- 1) Need for additional KBI resources**
- 2) Content to be included in POC access**
- 3) Areas in which nursing or medical education can be targeted**




Information Integration Impact on Patient Safety

- IOM (Crossing the Quality Chasm) identified efficient, rapid information support as critical in safe patient care
- Rapid, Just-In-Time education with evidence based information reduces reliance on “hallway consultations”
 - Static links – institutional and external documents
 - Dynamic searching of KBI databases
- Information tailored to quality and patient safety initiatives, e.g. safety, goals, core measures



Information Integration Impact on Patient Safety

- Fostering a culture of inquiry and analysis of clinical decisions
 - Identification of appropriate tools to address specific safety issues – e.g., PEPID, to address pediatric dosing
 - Ensuring reference material currency via centralized online access
- 




Information Integration Impact on Patient Safety

- Incorporation of specialized information not readily available e.g., complimentary and alternative medicine
- Integration of patient education requests into the medical record with documentation of teaching
- Provision of quality patient/consumer health information



E.P.O.C. Efforts at Lehigh Valley Hospital

A blurred photograph of a group of people, likely in a hospital setting, with a blue tint.

Bryan G. Kane, MD, FACEP
Lehigh Valley Hospital
Department of Emergency
Medicine

- **Define evidence-based medicine**
- **Demonstrate use of EBM for a clinical question**
- **Identify EBM resources at LVHHN**



Historical Perspective

JC

- Sir W. Osler 1875
- Sir J. Paget noted students in a bakery 1835
- Early US experience conducted in German, French or English

EBM

- McMaster Report 1992
- Shift from personal experience to “conscientious, explicit, and judicious use of current best evidence”



What is EBM?

- **Develop answerable question**
- **Efficiently acquire best evidence**
- **Critically appraise evidence**
- **Interpret the results for an individual patient**




EBM: A Way To Think About Your Patients

- Convenient
- Relevant
- Individualized
- Self-assessed
- Interesting
- Systematic

Box 1: The process of EBM

1. Convert information needs into answerable questions.
2. Track down with maximum efficiency, the best evidence with which to answer questions (whether from the clinical examination, the diagnostic laboratory, from research evidence, or other sources).
3. Critically appraise that evidence for its validity (closeness to the truth) and usefulness (clinical applicability).
4. Integrate this appraisal with clinical expertise and apply the result in clinical practice.
5. Evaluate one's performance.

q
it
b
ti
ti
in
“
e
s
I
r
c
c
M
h
s



So You Have a Clinical Question...

- **Does a best practice related to health care professional attire exist?**
- **Does evidence related to patient-provider introductions exist?**



Hunter vs. Gatherer

- **Information management**
- **Information grazing vs. searching**
- **Primary vs. secondary sources**





Subject: Journal Watch Emergency Medicine Alert for January 26, 2007
From: iw-emergency-medicine@alerts.stanford.edu
Date: 1/26/2007 8:02 PM
To: kane@aya.yale.edu

Emergency Medicine for January 26, 2007

[Decreasing CPR Interruptions in Out-of-Hospital VF Arrest](#)

Summary and Comment | Subscription Required
Fewer interruptions were associated with improved outcomes.

By Aaron E. Bair, MD, FAAEM, FACEP
January 26, 2007
Covering: Rea TD et al. *Circulation* 2006 Dec 19; 114:2760-5

[Bend in ETT Stylet Affects Ease of Intubation](#)

Summary and Comment | Free
Bends greater than 35 degrees might increase risk of difficult intubation.

By Diane M. Birnbaumer, MD, FACEP
January 26, 2007
Covering: Levitan RM et al. *Acad Emerg Med* 2006 Dec 13:1255-8

[ICU Discharge at Night Increases Mortality and Readmission](#)

Summary and Comment | Subscription Required
Only half of nighttime discharges were due to emergent admissions in this large Canadian study.

By Tiffany M. Osborn, MD
January 26, 2007
Covering: Priestap FA and Martin CM. *Crit Care Med* 2006 Dec 34:2946-51

[Rx Labels Frequently Misunderstood](#)

Summary and Comment | Subscription Required
Low literacy prevents understanding of even seemingly simple labels.

By J. Stephen Bohan, MD, MS, FACP, FACEP
January 26, 2007
Covering: Davis TC et al. *Ann Intern Med* 2006 Dec 19; 145:887-94
Schillinger D. *Ann Intern Med* 2006 Dec 19; 145:926-8

- **Departments**
 - **Non-Clinical**
 - **Library Services**

LVHHN Library Services - Windows Internet Explorer

anet.lvh.com/WebPublic/diveducation/dived/Library/LibraryServices/DanaInfo=www.lvh.com+LibraryServices.html


File Edit View Favorites Tools Help

Search web... News Gallery MSN Maps Favorites PC Health Spaces Mail Messenger

Y! Search Web Mail My Yahoo! Shopping Games Music Answers Personals

Google Go Bookmarks 248 blocked Check AutoLink AutoFill Send to Settings

LVHHN Library Services




LVHHN Digital Library Services

610-402-8410

UpToDate: Remote Access Restrictions Starting July 31, 2007

Due to contractual limitations imposed by UpToDate for fiscal year FY08, access to this tool will be limited to the physical confines of the three main network campuses and the extended network of Health Centers. Feel free to complete our [feedback form](#) for any comments or concerns (including your name is optional).

- New Reports: [Past Reports](#)
- [Guidelines for Prevention of Infective Endocarditis](#), American Heart Association, 4/27/2007
 - [Aspirin Dose for the Prevention of Cardiovascular Disease](#), JAMA 297(18):2018-2024, 5/19/2007
 - [Cardiac Surgery in Pennsylvania](#), Pennsylvania Health Care Cost Containment Council, June 2007
 - [Treatment for Superficial Thrombophlebitis of the Leg](#), Cochrane Database of Systematic Reviews, April 2007

 = Additional information or instructions

- Library Services**
- [Electronic Journal List - Alphabetic List](#)
 - [Electronic Books - Browse by subject](#)
 - [Online Catalog for Print Books and Journals](#)
 - [Library Information Request Form](#) - Request articles, book chapters, interlibrary loans.
 - Current Awareness Service - **COMING SOON**

- Literature Research Databases**
- [Ovid](#) 
- Medline
 - CINAHL: Cumulative Index to Nursing & Allied Health
 - HealthStar (health administration)
 - PsycInfo
- [PubMed](#)
- [Medical Subject Heading \(MeSH\)Browser](#)
- [EBSCOhost](#) 
- Medline

start F. i. N W 9 2 2 3 A Search Desktop Address Norton 8:11 PM



Address bar: <http://www.myhq.com/public/lv/lvhnm/>

Search: Google

File Edit View Favorites Tools Help

Search web... News Gallery MSN Maps Favorites PC Health Spaces Mail

Y! Search Web Mail My Yahoo! Shopping Football Games Music Answers

Google Go Bookmarks 116 blocked Check AutoLink AutoFill Send to Settings

myHq : Division of Emergency Medicine - Lehigh Valley...

myHq Division of Emergency Medicine - Lehigh Valley Hospital, Allentown, PA [Home / Register for your own page! / Other public pages](#)

-- Search -- [Public Pages](#)

This page was developed by Ina Ashford, M.Ed., Alexander Rae-Grant, MD and Brian Stello, MD as part of the EPOC (Evidence-based medicine at the Point-Of-Care) project. It is designed and will be customized to meet the point-of-care information needs of members of the division of Emergency Medicine while seeing patients in inpatient and outpatient settings.

X Local - 18105

- [Weather](#)
- [TV Listings](#)
- [Movies](#)

X Evidence-Based Links

- [Vanderbilt center for EBM](#)
- [DynaMed](#)
- [InfoRetriever \(subscription\)](#)
- [TRIP Database](#)
- [SUM Search](#)
- [AHRQ Evidence Based Medicine](#)
- [BMJ Updates](#)
- [Oxford Center for Evidence Based Med](#)
- [Bandolier](#)

X Guidelines/Textbooks

- [Institute for Clinical System Improvement](#)

X Tutorials and Links

- [Centers for Disease Control](#)
- [PubMed](#)
- [National Institute of Health](#)
- [Netting the Evidence](#)
- [Downstate EBM site](#)
- [UVA CME Website](#)
- [Emedhome](#)
- [The heart](#)
- [LVHHN physician base](#)
- [**Neuro and other links](#)
- [McMaster Family Med Links](#)

X Pharmacology

- [Therapeutics Letter](#)
- [Micromedex](#)

X Societies

X LVH EMBLOG

X Bedside Diagnosis

- [ACP bedside diagnosis](#)

X Diagnosis

- [Peripheral nerve anatomy](#)
- [Isabel diagnostic](#)

X Misc

- [Nat. Cent. Em. Med Informatics](#)
- [NIHSS calculator](#)
- [Amazon.com calculators, various](#)
- [Clinical trials](#)

X News

- [CNN](#)
- [New York Times](#)
- [USA Today](#)
- [MSNBC](#)
- [Pathfinder](#)

X Download

- [Stroud's WinFiles](#)

X Journals

- [Emergency Med. Magazine](#)
- [Emergency Medical Journal](#)
- [Annals of Em. Med.](#)
- [Academic Emerg. Med. Journal](#)

X Clin Calculators

- [MEDAL clinical calculators, etc.](#)

X LVH EMRES SITE

- [LVH EM Resident Site](#)

X Atlases

- [Derm Atlas](#)
- [EBBMS med photos](#)

Search Engines

The screenshot shows a Windows Internet Explorer browser window with the address bar set to <http://www.ncbi.nlm.nih.gov/sites/entrez>. The search bar contains the text "physician greeting evidence based". The search results are displayed on the PubMed website, showing two items:

- 1: [Makoul G, Zick A, Green M.](#)** An evidence-based perspective on greetings in medical encounters. *Arch Intern Med.* 2007 Jun 11;167(11):1172-6. PMID: 17563026 [PubMed - indexed for MEDLINE]
- 2: [Kim S, Farber S, Kolko BE, Kim W, Ellsbury KE, Greer T.](#)** Faculty and student participation in online discussions of palliative care scenarios. *Fam Med.* 2006 Jul-Aug;38(7):494-9. PMID: 16823675 [PubMed - indexed for MEDLINE]

The browser's taskbar at the bottom shows the Start button, several open applications (FW:Re..., 3 Mic..., Norton..., 3 Mic..., 4 Int...), and the system tray with the time 2:30 PM and temperature 52°.



Some Areas of Excellence

- **Library Services**
- **Family Practice**
 - Faculty
 - Residents
 - Outpatient clinic
- **Nursing**



Just a Few Barriers?

- **Behavior**
 - New and different
 - Inserted into patient encounter
- **Technology**
 - Computers
 - Digital native vs. immigrant
- **EBM skill-set**
 - MeSH headings
 - Literature appraisal



Does All This Matter?

- **35 attendings and 12 residents**
- **Community hospital**
- **Syllabus, text and 7 hours of lecture**
- **262 consecutive pre, 275 post**
- **EBM “best Rx” from 74 to 82% (p=.046)**
- **Use of RCT Rx from 49 to 62% (p=.016)**
 - *Strength of evidence improved as well*
 - *Cardiac specific 87 to 98% (p=.02)*

End





Clinical Decision Support at LVHN

Don Levick, M.D., MBA





Current State of CDS

- Current state at LVH
- National initiatives
- Where CDS is headed

- Expert rules embedded into LastWord
- Event triggers in MetaVision
- Web resources
 - EPOC
 - Standard reference based resources
- Nursing protocols
- CAPOE order sets

Examples

- Order Set
- Protocol
- Expert Rules
- Resource Page



National Initiatives

- Pay For Performance (P4P)
- Core Measures
- Chronic Disease Management
- CMS Requirements
- Regulatory/Review Agencies
 - JCAHO
 - LeapFrog





The Next Steps

- Zynx
- Context sensitive expert rules
- Diagnosis triggered order sets
- Embedded evidence based links
- Protocols that drive orders based on results or documentation

End

