

August 30, 2018 CDS Connect Work Group Call



CDS Connect

AGENDA

3:00 – 3:05	Roll Call, Ginny Meadows (MITRE)
3:05 – 3:10	Review of the Agenda, Maria Michaels (CDC)
3:10– 3:50	Trust Framework Work Group: Promoting Trust in CDS Connect Artifacts: Overview of Final White Paper, Blackford Middleton (PCOR CDS-LN) <ul style="list-style-type: none"> • Share final white paper and findings from the Trust Framework Work Group • Question and answer period
3:50 – 4:05	Sharing Lessons Learned on the Repository, Sharon Sebastian (MITRE) <ul style="list-style-type: none"> • Discuss methods to share lessons learned and key details to aid future implementers • Question and answer period
4:05– 4:20	Final Pilot Report, Ginny Meadows (MITRE) <ul style="list-style-type: none"> • Share Pilot findings and lessons learned • Question and answer period
4:20 – 4:25	Other Announcements, Sharon Sebastian (MITRE) <ul style="list-style-type: none"> • Status of publishing the Pain Management Summary artifact, SMART on FHIR app, and CQL Services prototype tool
4:25 – 4:30	Open Discussion and Close Out, Maria Michaels (CDC) <ul style="list-style-type: none"> • Open discussion and announcements • Concluding comments, review next steps and adjourn

- *CDS = Clinical Decision Support*
- *CDC = Centers for Disease Control and Prevention*
- *CQL = Clinical Quality Language*
- *PCOR CDS-LN – Patient-Centered Clinical Decision Support Learning Network*
- *SMART on FHIR= Substitutable Medical Applications, Reusable Technologies on Fast Healthcare Interoperability Resources*

Trust Framework Work Group: Promoting Trust in CDS Connect Artifacts: Overview of Final White Paper

Sharing Lessons Learned on the Repository

Sharing Lessons Learned from CDS Implementation

(at present)

Goal:

Capacity to **share lessons learned** and make them more **easily discovered** via the CDS Connect Repository

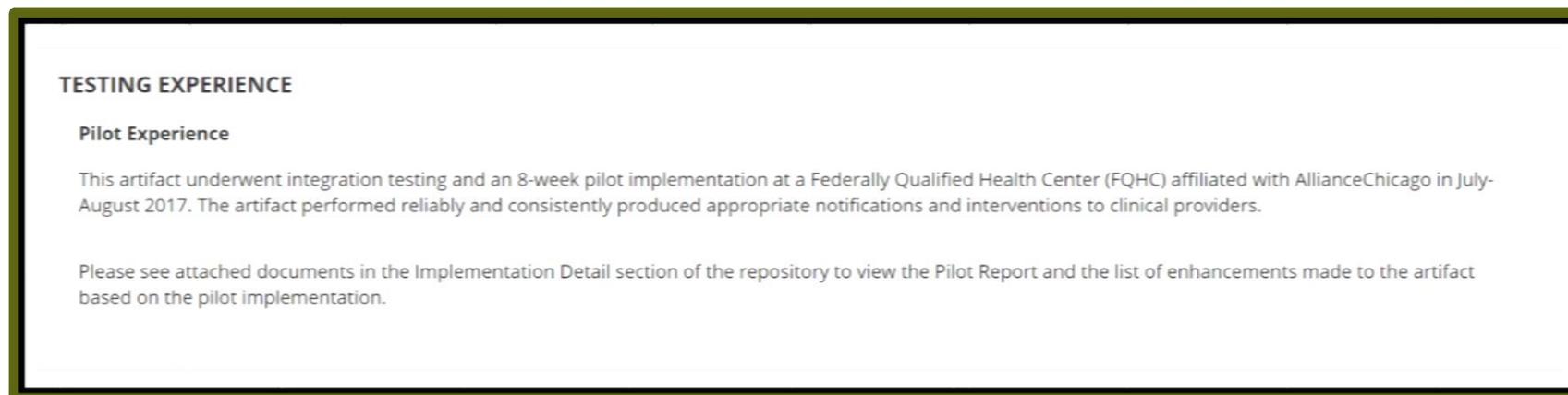
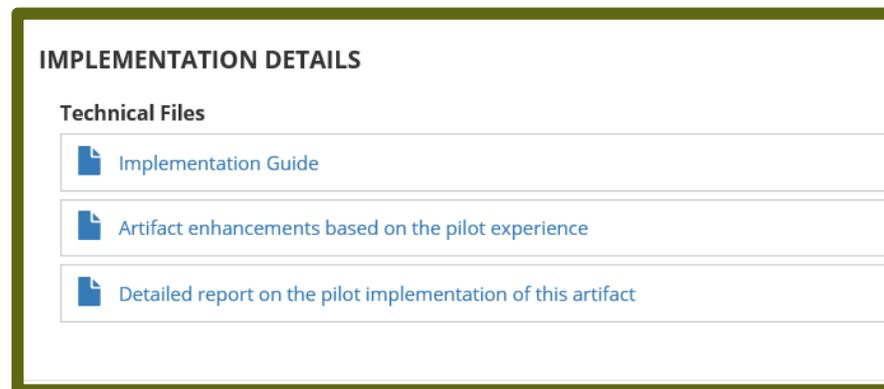
At present: Resources and information is within each artifact

- Metadata – e.g., Pilot Experience
- Code
- Miscellaneous attachments that may/may not include lessons learned and implementation findings

Sharing Lessons Learned from CDS Implementation

(at present)

- Metadata fields
 - Pilot Experience
 - Cautions
- Attachments
 - Technical Files
 - Miscellaneous Files



Sharing Lessons Learned from CDS Implementation

(at present)

- Enhanced attachments

Statin Use for the Primary Prevention of CVD in Adults

Presents a United States Preventive Services Task Force (USPSTF) statin therapy recommendation for adults aged 40 to 75 years without a history of cardiovascular disease (CVD) who have 1 or more CVD risk factors (i.e., dyslipidemia, diabetes, hypertension, or smoking) and a calculated 10-year CVD event risk score of 7.5% or greater.

Artifact Type
 Event-Condition-Action (ECA) rule

Creation Date
 Mon, 07/10/2017 - 12:00

Version
 0.1.0

Status
 Active

Identifier
 CDS 009

Experimental
 False

PROMINENT REPORTS

[Detailed report on the pilot implementation of this artifact \(DOC 2.7Mb\)](#)

[Artifact enhancements based on pilot implementation findings \(DOC 91Kb\)](#)

Sharing Lessons Learned from CDS Implementation (proposed)

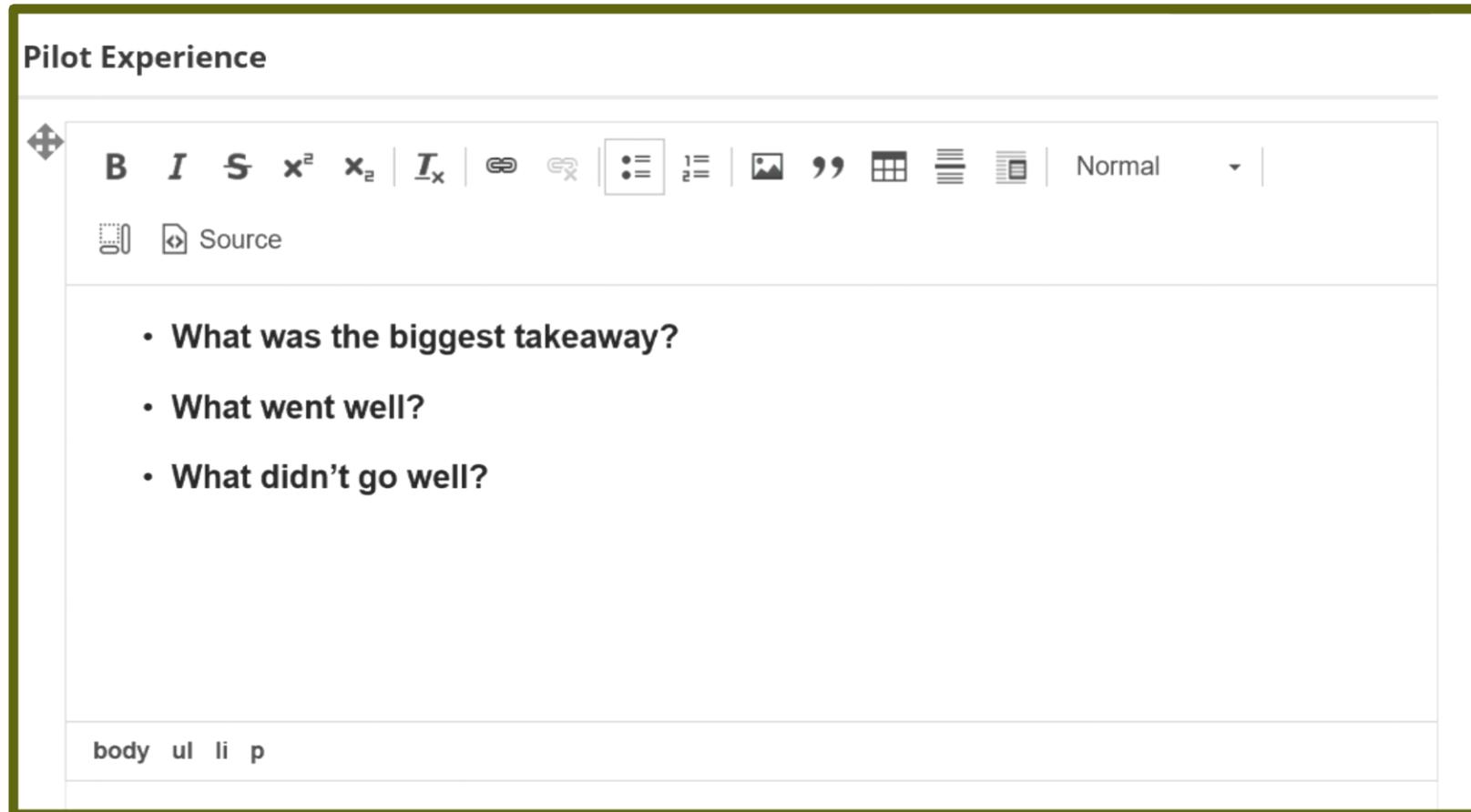
Pilot Organization Details	
Pilot site name (optional)	
City, State (optional)	
Type of care setting (inpatient, primary care, etc.)	
Integration Details	
Staff roles (and skills required to integrate the CDS)	
Number of hours spent by each team member on the effort	
Challenges encountered	
CDS End User Details	
Target end user role (prescribing provider, RN, etc.)	
Number of CDS users	
End user feedback	
Impact on patient care	

**“At a Glance”
Implementation Details**

Pilot Details	
Duration	
CDS use statistics (use, along with opportunities to use)	
Overall impression	
Accuracy challenges	
Reliability challenges	
Recommendations	
Recommendations for future iterations of the CDS	
Recommendations for future implementers	

Sharing Lessons Learned during CDS Implementation (proposed)

- What are the right prompts?



The screenshot shows a rich text editor interface with the title "Pilot Experience". The toolbar includes icons for bold (B), italic (I), strikethrough (S), subscript (x₂), superscript (x²), underline (I_x), link, unlink, bulleted list, numbered list, image, quote, table, horizontal line, and print. A "Source" button is also visible. The main text area contains a bulleted list of three prompts:

- What was the biggest takeaway?
- What went well?
- What didn't go well?

At the bottom of the editor, the HTML source code is visible: `body ul li p`.

Sharing Implementation Tools and Details

(at present)

- Varies by contributed artifact/contributor
 - If shared, they are usually attachments
 - Examples:

- Implementation Checklist
 - Skills required
 - Level of effort
 - When needed

- Implementation Timeline
- Work Plan
- Communication Plan
- Training Plan
- Training Materials
- Test Plan
- Analytic Plan

Task
Identify Governance and/or Process Impact and Requirements
Determine if there are organizational CDS review requirements
Determine if/how the CDS will impact existing CDS
Determine if there are organizational documentation requirements
Determine any other governance or oversight requirements
Review current clinician workflow and areas of potential impact
Develop Implementation Plan
Determine implementation strategy (pilot vs wide-scale deployment, etc.)
Develop Implementation Plan and Timeline
Develop Test Plan

Refugee Health CDS Implementation Checklist				
	Task	Task Owner	Completed	Resource Identity, Owner, or Location
PEOPLE	Identify Clinical Champion to serve as Implementation Leader			
	Identify Impacted Clinicians and other End Users			
	Identify Subject Matter Expert / Clinical Content Reviewer (can be clinical champion or other clinician)			
	Identify CDS Integration Team Leader			
	Identify Data Abstractor/Analyst			

Final Pilot Report

Pilot Activities

Pilot has **officially ended** (8/20/2018) – Many thanks to our partner, OCHIN!

- Reported Complete in July
 - Weekly analytics and troubleshooting
 - Planning for pilot focus group
- Completed since July Update
 - Pilot focus group
 - Final analytics reports

Pilot Focus Group Findings

- **Clinicians generally found the Pain Management Summary app useful**
 - Found the User Interface “simple and intuitive”
 - Informed their decision-making process
 - Described their prior manual process as “clunky”
- **Barriers:**
 - App display lag time
 - Inconsistent display of MME, urine drug screen results, and non-pharmacologic treatments
- **Recommendations:**
 - Integration with the California PDMP
 - Integration with “medMatch”

MME = Morphine Milligram Equivalents

PDMP = Prescription Drug Monitoring Program

Pilot Lessons Learned and Future Recommendations

- **Pilot CDS integration**
 - Determine methods for debugging and performance testing if direct access to the pilot health IT system is limited
- **Pilot FHIR support**
 - Consider any limitations in EHR-support of FHIR concepts
- **Engagement of key resources**
 - Engage all key members of the pilot team early in the pilot process

Other Announcements, Open Discussion, and Close-out

Publishing CDS Connect Resources

- **Target date: on/before September 11th**
- **Location**
 - CDS Connect Repository
 - Pain Management Summary artifact
 - Metadata, CQL, Implementation Guide, Implementation resources (e.g., work plan, training materials)
 - Link to app on GitHub
 - GitHub
 - Pain Management Summary SMART on FHIR app (goal: open source)
 - Integrates Pain Management Summary CQL for execution against EHR data
 - Enables a rich user interface
 - CQL Services prototype tool (goal: open source)
 - Delivers CQL-based CDS as a service
 - Exposes custom RESTful APIs and CDS Hooks-compliant APIs

*RESTful = representational state transfer
APIs = Application Programming Interfaces*

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