

Cincinnati Children's Hospital Medical Center

### **Organization Name:**

Cincinnati Children's Hospital Medical Center

### **Organization Address:**

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### **Organization Contact:**

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### **Schema Archetype**

Inpatient, Community Hospitals

### **Schema Factors**

Inpatient, Urban, Academic, >200 Beds

### **Organization Summary**

Cincinnati Children's Hospital Medical Center (CCHMC) is a 324 bed tertiary care freestanding children's hospital serving a primary area with over 550,000 children in the southern Ohio, northern Kentucky, eastern Indiana, western West Virginia region. In addition to the main campus, there are 15 off-site clinics.

### **IT Environment**

CCHMC began using the INVISION system from Siemens Medical Health Services Corporation in 2000. CCHMC later added advanced clinical applications, including computerized provider order entry (CPOE) with clinical decision support such as order sets, best practice guidelines, clinical documentation, and rules engines.

### **CDS Achievement**

CCHMC has been a leader in the use of health IT for pediatric medicine. One of their exemplary initiatives was the integration of order sets into their existing EHR system. Prior to the order set initiative, physicians were using 470 pre-printed orders that were often redundant, contained outdated medications or medication errors, lacked an origination date, and were missing information about the source of

the orders. CCHMC instituted a management process to create a more consistent and evidence-based approach to care. CCHMC followed a multi-step approach:

- A forms committee was created to solicit and review proposed order sets
- An intranet order set repository was created to house order sets by category
- Proposed order sets were reviewed by the author and pharmacist to ensure the order accurately reflects the original content and can fit into workflow
- A formal sign off process from the author is required before the order set goes live in the system
- Order sets were built into the system, including convenience sets for specific departments

At the time of the Davies Award (2003), 181 Order Sets (27 of which are best practice guidelines) and 48 convenience sets were approved for use. Individual physician order sets are not permitted in the ICIS as the institution is focused on evidence or consensus-based consistent approaches to care.

## **Lessons Learned**

- A centralized order set repository can be a useful strategy to provide more consistent, evidence based care.
- For order sets, a workflow analysis from the perspective of the clinician and the recipient (e.g., pharmacist) can improve utilization.
- Having order sets available facilitated the transition to electronic order entry. These order sets were designed to significantly improve physician efficiency in contrast to ordering each item of patient care individually.
- During implementation, it is best to have project team members, rather than clinical champions, provide support. It may be difficult or impossible to pull champions away from their clinical duties

## **Awards, Recognitions, and Citations**

2003 HIMSS Davies Organization Award Recipient. Award Application available at: [http://www.himss.org/content/files/davies\\_2003\\_cincinnati.pdf](http://www.himss.org/content/files/davies_2003_cincinnati.pdf)