

## VISN 8 - INTERACTIVE PATIENT CARE SYSTEM REQUIREMENT

### QUESTIONS AND ANSWERS

1. In terms of VISN 8, do you know the average LOS for inpatient stays?  
**No, it really depends on what type of inpatient (i.e. medical, acute, DOM, CLC)**
2. How many Community Living Center's exist today in VISN 8 and how many are using the current IPC solution?  
**I believe 7 of 8 VISN 8 facilities have IPC within their CLC. I would need to verify this.**
3. Patient Alerts: Ability to provide various alerts to patients based on time of day, day/time of admission, gender, age, new prescribed education or medication, etc. System should have ability to send follow up alerts to patients within a configurable period to ensure that the patient's issue was resolved to their satisfaction, and if not escalate the alert to additional staff.
  - a. If this is being done today, can you please map out an example of a patient alert workflow? If not being executed today, what a patient alert workflow would look like?  
**It is being done today, but I do not have a workflow readily available to share. One example is that we are asking every inpatient if they are satisfied with the cleanliness of their room. If the answer is no, the system automatically sends an email message to staff that can perform real-time service recovery**
4. Are there any documented integration standards defined for CPRS/VistA?  
**Yes, I believe some vendors have established a separate ISA/MOU with the VA for the Vista integration.**
5. Care Plans / Clinical Workflow Integration: System should have the ability to create and customize multi-step workflows that automatically prompt, educate, assess, and re-prompt the patient if necessary (i.e. Fall Prevention, Pain Assessments, Discharge and Heart Failure Care Plans).
  - a. If this is being done today, can you please map out an example of a 'custom' multi-step care plan workflow? If not being executed today, what this care plan workflow would look like?  
**These workflows were designed at the local level and I do not have any current information readily available to share. The IPT is made up of local POC's that will likely have examples to share.**
6. Documentation:
  - a. Status of 'Outcomes Achievement Plan' progress
    - i. Assuming these are pre-defined KPI's?
      1. If yes, have these been defined with the current implementation? If yes, can you share the KPI's?  
**These include SHEP and other Quality measures; examples attached**
    - ii. If not, are you expecting the vendor to work with VISN 8 to create new outcomes objectives?

Yes, as described within the PWS

- b. Nurses' stations computers must include an icon to identify patient interaction and level of comprehension.
    - i. Assuming this is for Education content – for level of comprehension, are you using content today that has pre-built surveys that are invoked after content has been consumed?

No, it is limited to bedside teach-back currently until the Vista interface is established

      - 1. If no, how are these comprehension surveys created today?

limited to bedside teach-back currently until the Vista interface is established
      - 2. In terms of content education, is there desire to capture content rating (5-stars), teach-back, questions asked and who viewed the content?

yes

        - a. Does VISN 8 want this data to flow back to VistA once content is completed via a bidirectional interface?

Yes
  - c. Development of care plan by patient will be able to print at Nursing Station via the computer icon.
    - i. If this functionality exists today, can you provide a sample of what the print out looks like?

Does not exist until interface
7. Design: to align with VHA initiatives to include Healthy Living Messages.
- a. Can you please expand on what Healthy Living Messages are?

Just helpful information or reminders about things such as falls prevention, hand hygiene, importance of sleep, managing stress, etc.
  - b. Is this organic content created by the Hospital?

Yes
  - c. Is this a scrolling message or would it be used as a pop up banner with the message on the banner?

Either
  - d. Assuming VISN 8 will need the flexibility to configure and send through the administrative console  

yes

## Other Patient and Family Centered Care initiatives

These initiatives are broad and can be facilitated through different feature/function - can you please map out how you expect Family Centered **IPC Questions – VISN 8 Initiative**

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yes

- d. Other Patient and Family Centered Care initiatives



Pertinent information pushed to patient portal?

Yes Etc? **yes**

- b. Designed to have the ability to develop a personalized health plan
  - i. Can you please define what you mean by a personalized health plan?  
**Interactive Patient Care, and individualized health planning**
  - ii. If this functionality exists today, can you provide an example?  
**VA Whole Health**
  - iii. Is VISN 8 using any population health tools today that have care plan protocols?  
**Not sure**
  - iv. Does VistA provide care plan protocols?  
**Not sure, IPT would know**
  
- 11. Patient Education: The Contractor must provide a large library of content, both on demand and customized to individual patients.
  - a. Can you please provide the content sources you are using today?  
**Milner Fenwick**
  
  - b. When you say customized to individual patients – is this content that is dynamically triggered based on admission/diagnosis code?  
**Yes, exactly.**
  
- 12. Shopping Options: System should have the ability to place orders to the cafeteria, canteen, gift shop, etc.
  - a. When you say place orders, is the vendor creating the shopping cart experience?  
**No, just the bidirectional communication**
  
  - b. Is this functionality through an existing website? **Possibly**
  
- 13. Patient Surveys: Survey questions should be customizable on an individual patient level, and dynamically change the follow up questions based on each patient response.
  - a. Is this current functionality or is VISN 8 using a 3<sup>rd</sup> party tool to create dynamic surveys with branching logic?  
**Yes, this is current functionality that will be expanded when the interface is deployed**