

**RPMS EHR 2014 Pre Installation Checklist**

Site/Facility:

Area:

1. Communication & Outreach	Person(s) Responsible	Date Due	Complete	Comments
1.1. EHR/MU team meetings on a routine basis				
1.2. Inform leadership of the magnitude of RPMS EHR 2014				
1.3. Identify Super-users				
1.4. Conduct workflow assessments (see Workflow)				
1.5. Develop training plan for end-users (see Training)				
1.6. Establish post-installation deployment plan				
1.7. Review and disseminate contingency plan				
1.8. Review and update ALL policies and procedures				

2. Package Optimization	Person(s) Responsible	Date Due	Complete	Comments
2.1. Install, deploy and optimize required applications and systems:				
2.1.1. BMW				
2.1.2. iCare				
2.1.3. RCIS				
2.1.4. VistA Imaging				
2.1.5. Clinical Reminders				
2.1.6. Radiology				
2.1.7. Emergency Room System				
2.2. Identify end-user training needs for specific packages				

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3. User Reports	Person(s) Responsible	Date Due	Complete	Comments
3.1. Obtain list of active users				
3.2. Identify keys, menus & mail groups for active users				
3.3. Ensure personal contact information is removed and correct work information is added in RPMS for active providers				
3.4. Submit finalized list to Area IT				

4. Problem List Clean Up	Person(s) Responsible	Date Due	Complete	Comments
4.1. Develop plan for problem list clean up				
4.1.1. Clinicians to incorporate problem list clean up during normal workflow				
4.1.2. Generate reports for un-coded diagnoses				
4.1.3. Generate reports for allergies on problem list				

5. Adverse Reaction Tracking Package	Person(s) Responsible	Date Due	Complete	Comments
5.1. Remove allergies from problem list and enter into the Adverse Reaction Tracking package				
5.2. Complete free text allergy cleanup				

6. Pharmacy	Person(s) Responsible	Date Due	Complete	Comments
6.1. Remove pre-populated ICD-9 clinical indications from quick orders				
6.2. Define process for documenting POV for refill and counseling only visits				

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7. Consults	Person(s) Responsible	Date Due	Complete	Comments
7.1. Inactivate defunct consults				
7.2. Identify the appropriate SNOMED CT term for each consult				
7.3. Determine if a clinical indication will be mandatory or optional for consults (site specific)				
7.4. Generate reports to assess consult deficiencies				
7.5. Appropriately close consults				

8. Text Integrated Utility	Person(s) Responsible	Date Due	Complete	Comments
8.1. Generate TIU report to identify inactive/obsolete titles				
8.2. Generate TIU report to identify templates containing V POV and V POV Multi-line (to be replaced post-installation)				
8.3. Replace Active Problems object with Active Problems w/o Dates object				
8.4. Export backup copies of TIU templates				

9. Clinical Reminders	Person(s) Responsible	Date Due	Complete	Comments
9.1. Review current reminders and identify additional reminders to be installed				
9.2. Install and configure additional reminders				
9.3. Identify reminder dialogs that use and store POVs as additional findings				

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10. EHR GUI Template	Person(s) Responsible	Date Due	Complete	Comments
<b>10.1. Determine GUI template format (Area standardized template or modify existing template)*</b>				
10.1.1. Work with Area CAC regarding standard GUI templates				
10.1.2. Create GUI with new components on Area training database and export ( if modifying existing template)				
<b>10.2. Export backup copies of existing GUI template(s)</b>				

*\* Federal facilities must use OCA standardized GUI template*

11. Pick Lists	Person(s) Responsible	Date Due	Complete	Comments
<b>11.1. Export ICD POV pick lists and import into an Excel spreadsheet or use Fileman report</b>				
<b>11.2. Compare and contrast National SNOMED pick lists with existing ICD pick list</b>				
11.2.1. Identify deficiencies				
11.2.2. Use ICD pick lists as a starting point to select additional SNOMED terms				
11.2.3. Identify other SNOMED terms based on clinical practice to be added to the pick lists				
11.2.4. Define new pick lists to be created (specialty services/provider specific)				
<b>11.3. Create customized SNOMED pick lists on Area training database and export</b>				
<b>11.4. Export backup copies of existing CPT pick lists</b>				
<b>11.5. Export backup copies of existing Patient Ed pick lists</b>				
<b>11.6. Develop training plan for end-users on how to map ICD codes to SNOMED terms using the IPL</b>				

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12. CPT Superbills	Person(s) Responsible	Date Due	Complete	Comments
<b>12.1. Generate a Fileman report to identify superbill associations that contain ICD POVs (to be removed post-installation)</b>				
<b>12.2. Identify a plan for documenting CPT procedures that require a POV (i.e., Immunizations)</b>				
<b>12.3. Develop a training plan for end-users</b>				

13. Patient Registration	Person(s) Responsible	Date Due	Complete	Comments
<b>13.1. Ensure specific patient information is being collected (email address, health permissions, and preferred method of communication)</b>				

14. Health Information Management	Person(s) Responsible	Date Due	Complete	Comments
<b>14.1. Ensure coding queue is caught up to no more than 2 days of outstanding visits</b>				
<b>14.2. Generate HIM monitoring reports to identify deficiencies</b>				
14.2.1. PLAL – Report Listing Allergies Recorded on Problem List				
14.2.2. PRB – Fix Uncoded Problem File Diagnosis				
14.2.3. POV – Fix Uncoded POV Diagnosis				
14.2.4. PCC Error Reports (monitor with increased frequency)				
<b>14.3. Develop a communication mechanism to resolve visits that are missing a POV</b>				

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15. Radiology	Person(s) Responsible	Date Due	Complete	Comments
<b>15.1. Deploy or optimize the latest release of the Radiology package</b> (sites without an in-house radiology dept.)				
<b>15.2. Identify radiology exams that are requested by consult or referral</b> (sites with a radiology department)				
<b>15.3. Develop a plan to capture provider order entry for radiology services</b>				
15.3.1. Identify radiology exams to be created				
15.3.2. Identify radiology quick orders to be created				

16. Lab	Person(s) Responsible	Date Due	Complete	Comments
<b>16.1. Install Lab GIS GUI interface</b> (if using GIS interface)				
<b>16.2. Develop a plan to enter the clinical indication for labs ordered pre-installation</b>				
<b>16.3. Develop a plan to address orphan visits</b>				

17. EHR Visits	Person(s) Responsible	Date Due	Complete	Comments
<b>17.1. Configure telephone and chart review visits</b>				
17.1.1. Check parameter BGO POV DEFAULT CHART				
17.1.1.1. Set default POV for Chart Review				
17.1.2. Check PGO POV DEFAULT POV TELEPHONE				
17.1.2.1. Set default POV for Telephone Visit				

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18. Workflow	Person(s) Responsible	Date Due	Complete	Comments
<b>18.1. Generate provider productivity reports for baseline (pre-installation)</b>				
<b>18.2. Conduct workflow assessment for areas impacted with new components and processes</b>				
18.2.1. Providers (doctors, NPs, PAs, midwives, etc.)				
18.2.2. Nursing staff (clinic, PHN, DM program, etc.)				
18.2.3. Pharmacy				
18.2.4. Laboratory staff				
18.2.5. Radiology staff				
18.2.6. Coders				
18.2.7. Registration				
18.2.8. Scheduling				
18.2.9. Purchased and Referred Care				
18.2.10. Billing				
18.2.11. Emergency Room				
<b>18.3. Revise provider's scheduled appointment time (post-installation) to allow additional time for transition</b>				

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Area:

19. Training	Person(s) Responsible	Date Due	Complete	Comments
<b>19.1. Problem List cleanup guidelines</b>				
<b>19.2. Train Super-users</b>				
<b>19.3. Preparing for the deployment of the Integrated Problem List and ICD code to SNOMED CT mapping</b>				
19.3.1. Providers (doctors, NPs, PAs, midwives, etc.)				
19.3.2. Nursing staff (clinic, PHN, DM program, etc.)				
19.3.3. Pharmacy				
<b>19.4. Navigating the EHR GUI template - new components and format (as indicated)</b>				
19.4.1. CCDA: Clinical Summaries & Transition of Care				
19.4.2. i/Ed buttons				
19.4.3. Clinical Indications				
19.4.4. Referrals				
19.4.5. Clinical Information Reconciliation (training may be delayed)				
<b>19.5. Documenting POV for refills and counseling only visits</b>				
<b>19.6. Documenting Immunizations</b>				



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Site/Facility:

Area:

20. One Month Before	Person(s) Responsible	Date Due	Complete	Comments
20.1. Review Checklist and address plan to complete tasks				

21. One Week Before	Person(s) Responsible	Date Due	Complete	Comments
21.1. Review checklist and address tasks that still need to be completed				
21.2. Confirm that a contingency plan is established and disseminated to staff				
21.3. Confirm that backup copies of GUI templates are stored				
21.4. Confirm that backup copies of the TIU templates are stored				
21.5. Confirm that copies of the CPT pick lists are stored				
21.6. Confirm that copies of the Patient Education pick lists are stored				
21.7. Schedule time with Area IT to create a full backup				

I acknowledge that the items checked have been reviewed and all tasks completed. The Area Director has been given notice of our intent to upgrade to the 2014 RPMS EHR on: \_\_\_\_\_

Site Clinical Applications Coordinator

Site Information Technology Supervisor

\_\_\_\_\_  
Signature/Date

\_\_\_\_\_  
Signature/Date

Site Clinical Director

Site Chief Executive Officer/Facility Administrator

\_\_\_\_\_  
Signature/Date

\_\_\_\_\_  
Signature/Date

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**Site/Facility:**

**Area:**

<b>EHR-MU Team Members/Position</b>	<b>EHR-MU Team Members/Position</b>
<b>1.</b>	<b>2.</b>
<b>3.</b>	<b>4.</b>
<b>5.</b>	<b>6.</b>
<b>7.</b>	<b>8.</b>
<b>9.</b>	<b>10.</b>
<b>11.</b>	<b>12.</b>
<b>13.</b>	<b>14.</b>
<b>15.</b>	<b>16.</b>
<b>17.</b>	<b>18.</b>
<b>19.</b>	<b>20.</b>
<b>21.</b>	<b>22.</b>
<b>23.</b>	<b>24.</b>

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**Site/Facility:**

**Area:**

<b>EHR Super-users/Position</b>	
<b>1.</b>	<b>2.</b>
<b>3.</b>	<b>4.</b>
<b>5.</b>	<b>6.</b>
<b>7.</b>	<b>8.</b>
<b>9.</b>	<b>10.</b>
<b>11.</b>	<b>12.</b>
<b>13.</b>	<b>14.</b>
<b>15.</b>	<b>16.</b>
<b>17.</b>	<b>18.</b>
<b>19.</b>	<b>20.</b>
<b>21.</b>	<b>22.</b>
<b>23.</b>	<b>24.</b>