

Final Release Notes – External Partners v1.0

CHRIS 3.0/HPG 3.6

Organization	Health Shared Services Ontario
Division:	Business Technology Solutions
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Document Revision History

Version No.	Date	Summary of Change	Contributors
1.0	November 21, 2017	Any revisions from the Initial Release Notes V2.0 (Oct 2017) are highlighted in yellow.	F. Williamson

Executive Summary

This document provides specific information on the Enhancements and Provincial Data Updates included in CHRIS 3.0 - HPG 3.6 scheduled to be deployed on the evening of Friday December 1st, 2017.

Note: The deployment of CHRIS 3.0 / HPG 3.6 is scheduled to start the evening of Friday December 1st and continue through the weekend until Sunday December 3rd. During this time HPG including integrations will NOT be available. Please work with your LHIN(s) for downtime processes.

This section provides an executive summary of the projects / major changes and other enhancements included in CHRIS 3.0 and HPG 3.6.

1 Major Enhancements

Project	Overview
One CHRIS	While CHRIS has consistently matured throughout the years, various MOHLTC initiatives have demonstrated a need to create a leading edge solution whereby client records would be make accessible across LHIN boundaries.
Consolidation	CHRIS 3.0 includes not only feature enhancements but the consolidation element brings together client records from 14 LHINs, consolidating like clients into a single record.

1.1 One CHRIS

Background

A number of provincial initiatives focusing on modernizing LHIN systems to enhance service access and delivery across LHINs has been approved.

The strategic drivers for the evolution of CHRIS systems include:

- Improved analytics to enable capacity planning as per a key recommendation from the HSSOntario’s White Paper, “Making Way for Change” and in “Bringing Care Home” the report of the Expert Group on home and community care.
- External user access to CHRIS to allow LHIN health partners to contribute to the patient record.

- Supporting the Ministry of Health and Long-Term Care’s (MOHLTC) eHealth 2.0 objective of rationalizing and leveraging existing eHealth assets for the next phase of health care transformation. This strategy focuses on the use of systems with scalable models to support a wide range of providers.
- Key goals from the MOHLTC’s “Patients First: A Roadmap to Strengthen Home and Community Care”, including higher quality, more consistent and better integrated home and community care.

CHRIS 3.0 Program Scope

The CHRIS application is a provincial solution for managing LHIN patient records that has been used since 2008. While the application has consistently matured throughout the years, the initiatives highlighted above demonstrate a need to create a more robust platform capable of supporting the next phase of health care transformation.

CHRIS 3.0 will focus predominantly on infrastructure modernization and standardizations that will create consistency in its use by LHIN’s. The core activities contributing to the CHRIS 3.0 release include:

- The definition of provincial data standards for items such as patient risk, client codes and safety issues.
- The development of a provincial patient database that consolidates core client data (ie: name, address, phone number) and establishes a single provincial patient identifier.
- A technology infrastructure modernization to increase database capacity, system performance and availability.
- The establishment of policy foundations for external access to CHRIS.

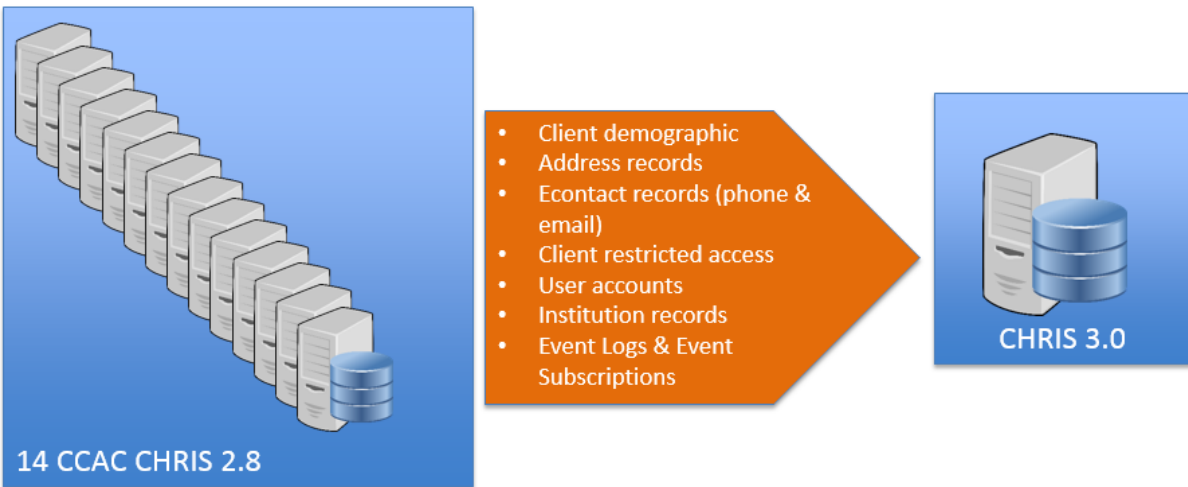
With the release of CHRIS 3.0 (scheduled for December 1st – 3rd, 2017), the HSSOntario is targeting minimal impact to Service Providers and E&S Vendors. An internal review was conducted to determine the impact to Service Providers and E&S Vendors; the results of that review are listed below.

Area	Details
Client Number	<p>New Provincial Client Number</p> <p>All clients will be assigned a new 8 digit provincial client number. Legacy client numbers will continue to be used, i.e.: for communicating with providers, equipment and supply vendors.</p> <p>New client records in CHRIS post CHRIS 3.0 go live will be assigned the new provincial client number. These records will not have a legacy client number.</p> <p>The new provincial client number will be used for community with external partners.</p>

Area	Details
	<p>It is important that external partners ensure their systems can accommodate the 8 digit provincial client number.</p> <p>Note: communication of the new 8 digit number will occur in both the PDF and PXML message formats. A briefing note has been circulated to the PXML service providers and equipment and supply vendors outlining the changes, impact and also include sample messages for testing purposes.</p>
Language Table Update	<p>The CHRIS provincial language table is being updated with the ISO 693.3 Living Languages standards.</p> <p>This table has significantly more language values than the existing CHRIS language table.</p>
Home / Mailing Addresses; Primary Phone Number	<p>As a result of consolidating client records to a single provincial client record, Home / Mailing Addresses and the Primary Phone Number may change.</p> <p>The consolidation will not impact service treatment locations or delivery / pick up addresses.</p> <p>Consolidating clients does mean that each client will have only one Home address; one Mailing address and one Primary Phone number. LHINs are reviewing this information but it is possible that post CHRIS 3.0 you may receive Service Referrals/Frequency Updates or Purchase Order message with a new Home address; Mailing address or Primary Phone number.</p>
Provincial On Hold	<p>In addition to making Client On Hold records part of the Shared Record a new On Hold reason has been added. 'Temporary Transition With Services' is used when a patient has gone to another LHIN (ie: to visit family; vacation home; etc) and is receiving services temporarily in that LHIN.</p>

1.2 Consolidation

The CHRIS 3.0 deployment includes the consolidation of client records from the 14 LHINs into a master database. Across the 14 LHINs there are scenarios where clients have been served by multiple LHINs, for example: clients that receive services in two locations that cross LHIN borders and clients that have moved from one LHIN area to another. Consolidation will use information within the client record to identify records that 'match'.



The diagram above illustrates at a high level what information will consolidate. Clients that match will have one client record in 3.0. The address, phone and email records for the matching clients will consolidate under the CHRIS 3.0 single client record.

It is important to note that consolidation will not impact service treatment location addresses and delivery / pick location addresses.

Communication with service providers and equipment and supply vendors will continue to use the 'legacy' CHRIS client number. Only new clients in CHRIS will be assigned the new 8 digit provincial client number.

1.3 Other Enhancements

Area	Details
PXML Schema Update	The PXML RA Report schema did not include the payment amount per line item. A new schema, BillingReconciliationReport v2.11, has been released. This new schema includes a data element for the line item payment amount.

2 Provincial Data Changes

2.1 Allergies

The following allergies will be released with CHRIS 3.0.

SMA #	891512 – CHAM 898175 – CW
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	898481 – CE 900111 - CHAM															
Affects	Service Providers, Vendors, other External Partners															
Description	<p>Updates for Allergy Types = Drug</p> <table border="1"> <thead> <tr> <th></th> <th>Generic Name</th> <th>Brand Name</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Xarelto</td> <td>Rivaroxaban</td> </tr> <tr> <td>2</td> <td>Choral Hydrate</td> <td>Somnote</td> </tr> <tr> <td>3</td> <td>Lidocaine HCL</td> <td>Lidocaine Hydrochloride, Accucaine, Xylocaine, Anestacaine, Dilocaine, L-Caine, Lidoject 1, Nervocaine, Truxacaine, UAD Caine, Xylocaine-MPF, Lidoject 2, Xylocaine Duo, Xylocaine HCl</td> </tr> <tr> <td>4</td> <td>Pantoprazole</td> <td>Pantoloc, Pantoprazole sodium sesquihydrate, Protonix, Protonix IV</td> </tr> </tbody> </table>		Generic Name	Brand Name	1	Xarelto	Rivaroxaban	2	Choral Hydrate	Somnote	3	Lidocaine HCL	Lidocaine Hydrochloride, Accucaine, Xylocaine, Anestacaine, Dilocaine, L-Caine, Lidoject 1, Nervocaine, Truxacaine, UAD Caine, Xylocaine-MPF, Lidoject 2, Xylocaine Duo, Xylocaine HCl	4	Pantoprazole	Pantoloc, Pantoprazole sodium sesquihydrate, Protonix, Protonix IV
	Generic Name	Brand Name														
1	Xarelto	Rivaroxaban														
2	Choral Hydrate	Somnote														
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4	Pantoprazole	Pantoloc, Pantoprazole sodium sesquihydrate, Protonix, Protonix IV														

2.2 Bed Types

This is an update to an existing Bed Type description. This update has been applied to Production prior to the CHRIS 3.0 release.

SMA #	865057 - HNHB
Affects	Hospitals
Description	<p>Rename the 'Short Stay Convalescent Care' bed type under the Short Stay Convalescent Care Referral Type to:</p> <ul style="list-style-type: none"> • Short Stay Convalescent Care/Activation Restoration <p>This change was vetted through OCRB group and the Provincial Placement Managers group.</p>

This update will be released with CHRIS 3.0.

CST #	909740 – HSSOntario 907610 – HSSOntario 889935 - CENT
Affects	Client Services - Placement
Description	NEW BED TYPES:

Reunification Priority Access Beds

The Ministry of Health and Long Term Care (MOHLTC) have created directives for new regulations in the Long Term Homes Care Act, 2007, to support spousal and partner reunification in Long Term Care Homes (LTCH) for implementation January 1, 2018. LHIN LTCH placement coordinators are mandated to follow the placement rules set out in the Long Term Care Homes Act 2007, and Regulation 79/10.

The new regulations introduce Reunification Priority Access Beds (RPABs), dedicated beds across all LTC homes reserved for Category 1 Crisis applicants seeking to reunite with their spouse/partner. A new bed type of Reunification Priority Access Beds have been added to support the new legislation. LHIN LTCH placement coordinators will be required to manage a separate wait list in CHRIS specific to RPABs. Concurrently, RPAB applicants should also be included in the regular Category 1 Crisis wait list, ensuring their priority for the first vacancy.

Long Stay ELDCAP Beds

MOHLTC has an operational business need to replace the manual process in bed vacancy reporting to OCCM for the Province of Ontario.

In CHRIS 3.1, HSSOntario will add a new data element (bed class) and an additional bed type (Long Stay ELDCAP Bed) to further automate the CPRO extract and report bed vacancies to the Ministry. This project ensures all data collection is done in a consistent and streamlined manner, resulting in improved data quality in reporting.

Residential Hospice

In order to facilitate the ability to manage referrals for Residential Hospices for End of Life patients in the community through the eReferral functionality, the Central LHIN has implemented a new bed type (Residential Hospice) under the Complex Care End of Life Referral Type. This will help us better identify, manage and report on this bed type.

[LHINs to submit CST for enablement.](#)

2.3 Note Types

This update has been applied to Production prior to the CHRIS 3.0 release.

SMA #	893844 - CHAM
Affects	Service Providers, Vendors, other External Partners
Description	Added new Note Type in Client Notes: <ul style="list-style-type: none"> • Health Link

2.4 Delivery Priorities

This update has been applied to Production prior to the CHRIS 3.0 release.

SMA #	883400 - CHAM
Affects	E&S Vendors
Description	Added new Delivery Priorities: <ul style="list-style-type: none"> • Next Business Day • Bulk Delivery in Clinic

2.5 Health Links

This update has been applied to Production prior to the CHRIS 3.0 release.

SMA #	891773 – CHAM
Affects	External Partners
Description	Added new Health Link (available under Client Coding): <ul style="list-style-type: none"> • North Lanark Health Link

This update will be released with CHRIS 3.0.

CST #	885937 – CHAMP 907728 - CE
Affects	Client Services; External Partners
Description	UPDATED HEALTH LINK NAME: Ottawa East Health Link CHAMP LHIN has updated the Health Link Client Code of East Ottawa Health Link to now Ottawa East Health Link.

	<p>Peterborough City and County Health Link</p> <p>CE LHIN has updated the Health Link Client Code of Peterborough Health Link to now Peterborough City and County Health Link.</p>
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2.6 Service Delivery Types

This update has been applied to Production prior to the CHRIS 3.0 release.

CST #	<p>904190- WW 899977 – CENT 889002 - NSM</p>
Affects	<p>Client Services; External Partners</p> <p>NEW SERVICE DELIVERY TYPES:</p>
Description	<p>Hourly Phone Call</p> <p>WW LHIN is developing an Integrated Comprehensive Care program that requires hourly phone call service type for several services. This will be available under the Home Care Referral Type. The following are the new service types added:</p> <p>Hourly Phone Call</p> <ul style="list-style-type: none"> • Hourly PT Phone Call • Hourly OT Phone Call • Hourly SW Phone Call • Hourly SLP Phone Call • Hourly RT Phone Call <p>Influenza Shot</p> <p>Central LHIN has implemented an Influenza Shot program for in-home nursing. This will be available under the Home Care Referral type and Nursing Service type. This new service delivery type will be excluded from the 5 day wait time stat.</p> <p>Respite – Caregiver Distress – Multiple Provider</p> <p>NSM LHIN’s Respite – Caregiver Distress services have been evolving requiring a new service delivery type to be created to support the need to Multiple Providers. This will be available under the Home Care Referral Type and Personal Support and Homemaking service type.</p>

2.7 Salutation

This update will be released with CHRIS 3.0.

CST #	895457 - WW
Affects	Client Services
Description	NEW SALUTATION: Mother WW LHIN has requested to add the “Mother” salutation to the drop down options within Client Information and/or Client Contacts. A “Mother” refers to a head nun with a convent. This will be available to all LHINs.