Innovate Today

GE Centricity™ Perinatal arms care team with data and documentation

Challenge

The Women’s Center at Baylor Medical Center at Frisco in Frisco, Texas, opened eight years ago with nine labor & delivery rooms, two observation beds and an eight-bed, Level 3 NICU. The center’s nursery is licensed for 16 beds, but because parent learning is an institutional priority, the nursery is rarely used—nearly all care is delivered at the bedside. Each month, the site welcomes between 210 and 250 babies into the world.

Challenged to integrate documentation and fetal monitoring and surveillance so staff could deliver their best care to every mother and her baby, the center installed GE’s Centricity Perinatal (CPN) system when a new member of C-level hospital leadership arrived from another institution raving about the system’s functionality and ease of use.

That leader was Chief Nursing Officer Randi Elliott, RN. In fact, Elliott—herself a certified nurse midwife—was brought to Frisco specifically to spearhead the opening of the new L&D service line. She had a hunch nurses, physicians and all end users would appreciate CPN as much as she had at her previous post.

Solution

Elliott’s hunch was right on. Karen Vest, RN, a clinical IS analyst who, until about a year ago, was a labor & delivery nurse, recalls discovering the CPN difference through the lens of firsthand experience she’d had with clinical colleagues who had become dispirited over EMR documentation difficulties.

Challenges

• Integrate documentation, fetal monitoring and surveillance
• Helps perinatal staff to decrease computer time and increase bedside time
• Fine-tune the EMR user experience to the women’s center setting

Solutions

• GE Healthcare’s Centricity Perinatal (CPN) equips clinicians who touches moms and babies with instant access to relevant data
• Secure mobile capabilities for nimbleness of staff availability and expertise
• Widespread physician buy-in ensures uniform high performance
• Fast, simple, intuitive training
• Ongoing technical support

Outcomes

• Significant time savings for nurses and physicians
• Proactive, smart decision support

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“In a previous facility I worked in, we went to our main EMR to document. Almost all the nurses wanted to quit because the process was taking up so much of their time,” says Vest. Once the staff at Baylor Medical Center at Frisco was up and running with CPN, she adds, “both our CNO and our VP said, ‘If we go back to using the hospital’s main EMR, I’m leaving!’” It’s been a huge time saver compared to the main EMR.

Speaking for herself, Elliott adds: “We’ve had nurses join from other healthcare systems after using other products, including hybrid solutions. When they come here and see how easy CPN is to use, it’s a no-brainer. They get right on board immediately.”

Seamless EMR integration
That isn’t to say that CPN replaces Baylor Medical Center at Frisco EMR. In fact, the rest of the hospital uses a separate EMR with which CPN is seamlessly compatible via HL7-based technology. As soon as data are entered in CPN, or as soon as care processes are documented, the information can be accessed to any credentialed user in the enterprise.

Today every clinician who touches prenatal, perinatal and neonatal patients—not only doctors and nurses but also hearing screeners, lactation consultants, clinical social workers and even dieticians—uses CPN to coordinate care throughout the continuum for both mother and baby. Both patients are linked for easy access throughout their care.

Meanwhile, in a world gone mobile, CPN supports remote access and gives Baylor Medical Center at Frisco Women’s Center secure access to encrypted views of fetal activity and maternal data via a Web-based browser or on a wide area network platform. Both options can help cut costs for hardware and IT management.

As for clinical benefits, having all relevant infant-care data in one place “is such a benefit for the physicians and for our quality and medical records department,” says Vest. “There’s no hunting around for the information. It’s all within that one area.”

“Flexible yet durable documentation
Speaking of documentation, Elliott says the hospital strives not to change processes any more than necessary.

However, “there are times when we do need to make changes in documentation, such as when we are looking to mine specific data or when a standard changes and now all of a sudden we have to capture new data,” says Elliott. “When we are looking at value-based reimbursement, there are certain things that absolutely have to be in the medical record. And looking at our data and making sure that the care is outcome-driven—as documented by the data that we collect—we can quickly and easily make those kinds of changes.”

Wide buy-in from physicians
Vest recalls how, as Baylor Medical Center at Frisco increasingly “went electronic,” the Women’s Center leadership went to some of the more influential and IT-savvy OB physicians.

“They helped pick out what they wanted,” she says of the physicians’ quick affinity for CPN. “We also got their input on how to use it to build the best workflow.”

Such physician involvement is key to getting enterprise-wide buy-in, Vest says. “You have to pick the doctor who’s probably going to resist the most and also the one who is going to be the most gung-ho about it,” she adds. “Part of the reason the solution has worked out so well for us is that we picked a good selection of physicians. They started helping us right from the start, and they gave input on exactly the way they wanted it before we rolled it out.”

Wonder-working workflows
Vest’s colleague Barb Gibson, a clinical analyst, touts CPN’s ease of use. “It’s so user-friendly that you don’t have to really know a lot to pick it up,” says Gibson. “When you’re working with the EMR, you’ve got to know where to chart. You’ve got to know that you need to do this and you need to do that. With CPN, the buttons are all at the top. Everything just flows.”

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Send-and-receive simplicity

The Women’s Center at Baylor Medical Center at Frisco also uses CPN to send discrete data for Meaningful Use, along with physician documentation, to the EMR. On the pull side, there’s an interface to receive test results without signing out of CPN.

Vest is an especially big fan of CPN’s strip-documentation capabilities. “The vital data that we can share between nurses and physicians, like time of birth and weight, can reach the physician within his documentation” interface, she says. “The doctor doesn’t have to re-document all that information, and he is more reviewing it, which ensures the quality of the data. If something was documented incorrectly, the doctor is able to catch it.”

Caring for two (or more)

“The patients’ stories are connected right there in one system,” says Vest. Here she’s speaking of patients in the plural because CPN’s Mother-Baby Link application automatically populates the infant’s record with relevant data from the mother’s pregnancy and delivery.

“Those two charts are intertwined,” she says. “You can see the mother’s information when you’re in the baby’s chart. This helps the pediatricians a lot, as they don’t have to go back and look somewhere else, and it overall helps improves care for both patients.”

GE Healthcare also offers an add-on module called Centricity Perinatal-Connect, which features bi-directional fetal strip annotations, enables documentation in the enterprise EMR, and comes with Centricity Perinatal Web module to facilitate access inside and outside the hospital.

Superb support for system tailoring

If there’s a new measure that we need to meet or a new assessment that needs to be built,” Vest says, “we are able to build that into CPN in almost a quarter of the time it used to take.”

“With the training GE Healthcare gives you, you become very well equipped to be able to build everything you would want in the system,” she adds. “They equip you with the tools you need. This is huge, and you don’t always get it with other vendors.”

She’s equally pleased with the CPN help desk. “Their clinical and technical support are phenomenal,” says Vest. “They follow behind and check up with you. They make sure that things are fixed and done and that you’re satisfied. You can call them with the smallest issue, and they will help you immediately. You don’t have to go through days and days of waiting to get something fixed. It’s immediate.”

Efficient documentation: High tech and high touch

Clinicians using CPN may most appreciate that they’re doing more documenting while spending less time staring at a screen.

“Instead of spending time documenting on everything, we’re actually able to spend more time at the bedside,” says Vest. “The ease of use, and having all the relevant clinicians documenting in one system, means no one is spending time clicking around looking for information.”

Physician training made ultra-easy

“CPN is very intuitive, so we spend very little time training physicians,” says Vest. “Whenever new physicians start, very little time is spent showing them around the system. And if they request modifications, it’s very easy to make changes.”

Reducing end-users’ 'grunt work'

CPN incorporates notifications and reminders to keep clinicians up to the minute, notifying users of site-specific clinical protocols or pathways at the bedside.

“We’re able to build computed text items, which can give notifications or calculate things for the user so they don’t have to calculate manually anymore,” says Vest. “It can tell them that they need to document on this or that item because they charted it. We’re able to use the system to give them notifications and also take away some of that manual process that they previously had to do. It helps take out a lot of that grunt work.”

Truly supportive decision support

“We have it where it will tell, based on what they’ve documented, what category the strip falls in—and then it actually will go further,” says Vest. “After the users have entered the information, he or she can utilize that information to make decisions such as next steps they need to take. It really helps with guiding through documenting. It’s flawless and, across the board, everybody is doing the same thing.”

Dynamic user group experience

Vest, a past president of the CPN User Group (CPNUG), extols the virtues of inter- or intra-enterprise knowledge sharing.

“You don’t have to reinvent the wheel, and that’s been another huge timesaver,” she says. “Instead of trying to figure out how you’re going to build something, you can see how others have built what you need. People post questions, and there’s a lot of timely interaction. Someone is always on there, seeing what people are asking and replying back.”

Coordinating the care team

Asked what one particular aspect she most appreciates about CPN, Barb Gibson says that, if she had to name one particular aspect of CPN that stands it head and shoulders above other clinical-info systems, it’s “the way that it integrates with each thing. The way the Mother-Baby Link puts the maternal information into the baby’s chart—the pediatricians really like to see that. The information is accurate because it’s exactly what the L&D nurse put in, drugs and conditions and everything.”

Impressing the Joint Commission

About a year and a half ago, JCAHO visited our facility,” concludes Vest. “When they went through the Women’s Center, one of the surveyors was a former OB nurse. She told our administration that this was an exceptional OB documentation system. They were very impressed with how well the nurses were able to navigate through every part of CPN.”
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Corporate Headquarters
GE Healthcare
500 W Monroe St.
Chicago, IL 60010-3076 USA
Tel: +1 847-277-5000 or
1 800-437-1171 or
1 800-682-5327
Fax: +1 847-277-5240

Corporate Headquarters
GE Healthcare
500 W Monroe St.
Chicago, IL 60010-3076 USA
Tel: +1 847-277-5000 or
1 800-437-1171 or
1 800-682-5327
Fax: +1 847-277-5240

Asian Headquarters
GE Healthcare
1 BLD-3F
No.1 Hua Tuo Road,
Zhang Jiang Hi-Tech Park
Shanghai 201203 China
Tel: 8621-38777888
Fax: 8621-38777499

Asian Sales Office
1 Maritime Square
#13-01 (Lift Lobby B)
HarbourFront Centre
Singapore 099253
Tel: +65 6 2918528
Fax: +65 6 2917006

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