2026 B.C. and Yukon Community Peer Group
Educational Presentations

Laying the Foundation for Emergency Care Through Incremental Digital Transformation
Presenter: Jacob Stav
Organization: Interior Health

Interior Health is a geographically diverse health authority with 28 Emergency Departments. Modernizing systems to deliver safe, timely, and consistent emergency care across this region requires deliberate, incremental change. This presentation describes how Interior Health advanced its Emergency Department service by building a digital foundation that supports clinical workflows, increases adoption of electronic documentation, and improves patient flow across rural and urban sites.

Historically, Emergency Departments operated with mixed levels of functionality, including paper-based processes, partial electronic workflows, and inconsistent site-specific practices. Using a clinically driven, phased approach, core digital capabilities were standardized across all EDs, bringing sites to a consistent baseline that supports reliable and scalable care delivery.

Key initiatives included eTriage, a standardized electronic triage assessment within MEDITECH that improves acuity assignment and clinical communication; Physician Electronic Documentation to support clearer and more complete clinical charting; the Emergency Department Digital Enhancement Project focused on workflow optimization and improved access to real-time patient information; and LINK-ED, a hybrid in-person and virtual physician coverage model supporting four rural EDs overnight through virtual collaborative workflows.

Together, these incremental improvements have established a shared digital foundation that enables clinicians to work more efficiently and spend more time on direct patient care. This presentation highlights clinical lessons learned, workflow considerations, and how thoughtful sequencing of digital change supports patient safety, quality, and clinical sustainability. This foundational work also enables future expansion to advanced electronic functionality, including computerized provider order entry, comprehensive electronic nursing documentation, artificial intelligence enabled tools, and integrated workflows across facilities.

Transitioning Documentation from PCS to Web Documents in MEDITECH Expanse: Address Gaps in Functionality and Impacting Clinical Practice

Presenters: Steve Denman and Shey Simpson
Organization: Fraser Health

The transition from the Client Server Imaging and Therapeutic Services (ITS) module to MEDITECH Expanse's Patient Care System (PCS) and Emergency Department Manager (EDM) significantly altered documentation workflows for Allied Health and referral-based Nurses. ITS previously offered essential capabilities that supported comprehensive assessment, interdisciplinary communication, and information sharing with community partners.
In contrast, PCS/EDM limits narrative visibility, does not allow drafts, lacks text formatting, cannot include images, and produces difficult to read printouts. These constraints prompted numerous workarounds and widespread reliance on Write/Add Note to restore lost functionality at the cost of data analytics. Despite the efforts, PCS/EDM has not fully met the documentation needs of these disciplines.

In the spirit of the conference theme Inspire + Impact, this project explored innovative alternatives to restore functionality, reduce workarounds, and enhance clinical practice. Web Documents (Provider Documentation - Note Type) already used for ambulatory documentation – offer draft capability, narrative and discrete fields, rich formatting, images, professional print quality, automatic clinician electronic signature display and flow to Nursing/Allied Health tab in the chart/EMR.

Innovation in the Emergency Department: Leveraging Surveillance to Improve Critical Review of "Left Without Being Seen" Labs & Diagnostics and Closing the Loop on Outpatient Referrals

Presenter: Dr. Kenneth Chan
Organization: Fraser Health

Emergency departments (EDs) face increasing challenges in managing patient flow and ensuring continuity of care. Two critical gaps often arise: patients who leave without being seen (LWBS) and discharged patients requiring outpatient follow-up. These scenarios pose risks for missed diagnoses and delayed care, impacting patient safety and system efficiency.

This presentation explores innovative strategies implemented within Fraser Health's EDs to address these gaps. First, we examine the use of surveillance tools to identify LWBS patients with pending laboratory or diagnostic results, enabling timely review and intervention. Second, we highlight a streamlined process for closing the loop on outpatient referrals for discharged patients, ensuring appropriate follow-up and reducing fragmentation of care.

Through real-world examples and workflow optimization, attendees will gain insights into leveraging electronic health record (EHR) functionality and clinical governance to improve

patient outcomes. These innovations demonstrate how technology and process redesign can enhance safety, accountability, and continuity in high-pressure environments like the ED.

Advancing Patient Scheduling Through Automation and Digital Innovation
Presenters: Nolan Konduc and Tim Eggleston
Organization: Interior Health

This presentation will explore advancements in patient scheduling, including the implementation of patient self-scheduling, automated digital referral management, emailed appointment preparation instructions, and enhanced digital patient communication. These innovations aim to mitigate the impact of postal strikes and financial challenges, improve the patient experience, reduce waitlists, and better balance workloads across Interior Health sites.

Beyond The Checkbox: Weaving Provincial Cardiac Data Standards into Ambulatory Design and Workflows
Presenters: Hannah Groves and Harjit Jassal
Organization: Fraser Health

Data collection is a critical driver of EMR adoption for healthcare organizations, enabling improved clinical decision-making, reporting, and quality improvement. However, implementing standardized data collection can present significant challenges, including duplicate entries, time-consuming manual processes, and transitioning clinical users from narrative “free-text” documentation to structured, query-based workflows. These barriers often impact clinician efficiency and user satisfaction, making thoughtful design and engagement essential.

This session will explore the innovative approach taken to integrate Cardiac Services BC standardized data elements into outpatient clinical workflows and documentation for Heart Function and Atrial Fibrillation Clinics at Royal Columbian Hospital. The project aimed to embed provincial standards within MEDITECH Expanse while maintaining usability and minimizing disruption to clinical practice. Key strategies included conducting a comprehensive gap analysis, engaging clinicians early in the design process, and leveraging user experience principles to ensure intuitive workflows. Stakeholder feedback informed iterative redesigns, resulting in a solution that maximized EMR functionality and aligned with provincial reporting requirements.

Attendees will gain insights into the critical role of clinical engagement and user experience design in successful data collection initiatives. The presentation will highlight imaginative technical solutions, lessons learned, and practical steps for embedding standardized data into

EMR systems without compromising workflow efficiency. Topics covered include gap analysis, initial design, stakeholder feedback, redesign (web documentation, BPMH via reconcile routine, lab results and ambulatory front office), and implementation—providing inspiration for similar projects across other clinical domains.

Ensuring Business Continuity for MEDITECH Expanse EMR: Fraser Health's Strategy
Presenter: Nandita Agarwal
Organization: Fraser Health

Objective: To outline FHA's comprehensive downtime preparedness framework that ensures continuity of care during EMR outages and rapid post-restoration.

Methods: FHA employs a multi-layered approach combining downtime resources, applications, and disaster recovery protocols:

Downtime Resources: Standardized Checklists, Clinical Workflows, Decision Support Tool, Site Readiness Playbook, Quick Reference Guides and Downtime Forms help maintain documentation and medication safety.

Downtime Applications:

Downtime EMR: Provides access to patient charts, Medication Administration Records, order sets, Medication Reconciliation views.

Downtime Registration: Enables patient Registration and movement during downtime with seamless upload post-recovery.

Network Down: Dedicated PCs and printers store patient charts locally during network outages.

Disaster Recovery Environment: An external setup tested annually to validate FHA's ability to restore EMR in catastrophic scenarios.

Results & Impact: This structured approach minimizes clinical disruption, safeguards patient safety, and ensures data recovery. FHA's model demonstrates how proactive planning and technology integration mitigate EMR downtime risks.

What's next: FHA is partnering with stakeholders to implement an ED Tracker dashboard for real time patient monitoring during downtime and enable electronic documentation of order sets and MAR.

Rapid Fire Presentations

Advancing Clinician Confidence in Health Information Systems: A Facilitator-Led, Multi-Modal Learning Framework

Presenter: Cherry (Nok) Cheng
Organization: Fraser Health

Frontline clinicians rely on health information systems (HIS) to deliver safe and effective patient care; however, system adoption and user confidence can vary widely across experience levels. To address this need, a Facilitator Support Workshop was developed to enhance HIS proficiency among both new and experienced clinicians. Workshop content was informed by direct clinician feedback identifying priority topics and areas requiring additional training support.

Grounded in Bandura's Social Learning Theory, the workshop applies a multi-modal learning framework emphasizing active, experiential engagement to strengthen knowledge retention and skill mastery.

Participants are guided through a beginning-to-end patient journey scenario reinforced with targeted "tips and tricks," instructor-led demonstrations, and structured hands-on practice within a TEST environment. An accompanying e-learning module was also delivered for more complex topics that could not be practiced in real time in TEST. A summary quiz and end-of-workshop survey assess understanding and capture opportunities for improvement. Iterative test runs with the facilitator team informed refinements to workshop structure, flow, and engagement strategies to optimize delivery and learner experience.

Overview of MEDITECH Change Management Processes

Presenter: Tammy Wong
Organization: Fraser Health

Established in 2024, the MCM Process represents a significant advancement in service delivery through our partnership with MEDITECH. Our governance framework prioritizes compliance, consistency, and stability, supporting a robust environment for clinical applications and systems that underpin quality patient care. Rigorous criteria going into the design of the process ensures build velocity aligns with project deliverables.

Collaborative engagement with stakeholders and sponsors at FHA has identified key gaps and solutions to strengthen business continuity. Notable achievements include streamlined service improvements, the adoption of SmartSheet for user-friendly change management, and the submission of over 4,000 technical change records for both test and production environments within 24 months. Change visibility and approval are maintained through weekly CAB meetings,

and the updated Change Control Policy within MEDITECH Circle clarifies authorized approvers from FHA.

All changes undergo thorough risk and impact assessments, validation, testing, and communication planning, resulting in improved workflows and stakeholder engagement. Technical changes are registered, reviewed, approved, and deployed collaboratively by FHA and MEDITECH specialists.

Our strategic approach and robust processes will continue to evolve, fostering ongoing dialogue with stakeholders.

Advancing Clinical Decision Support Through an Integrated Advanced Analytics Platform at Fraser Health

Presenter: Kavya Devarapalli
Organization: Fraser Health

Clinical Decision Support (CDS) empowers frontline clinicians with timely, data driven insights to enhance patient outcomes, operational efficiency, and quality improvement. At Fraser Health, the Centre for Advanced Analytics, Data Science & Innovation (CAADSI), in partnership with clinical and operational leaders, has developed an integrated Advanced Analytics Platform (AAP) that delivers near real-time patient and provider metrics across key clinical conditions, workflows, and programs.

The AAP leverages newly digitized data from MEDITECH Expanse data that were historically unavailable to surface actionable insights for executives and frontline teams. Embedded record level drilldown enables clinicians to rapidly identify patient specific opportunities for intervention, while leaders can assess system level trends with unprecedented timeliness. Prior to the AAP, clinical teams relied on manually coded data with significant delays, limiting the ability to monitor quality indicators or respond to emerging patterns.

As MEDITECH Expanse continues its phased rollout, the AAP seamlessly integrates new digital workflows, automatically ingesting and visualizing data to support continuous learning health system practices. The platform enables cross site comparisons to identify high performing outliers, monitor adherence to best practices, and link process performance to clinical outcomes.

By providing live, intuitive, and clinically relevant analytics to clients in an easy to access way, the AAP strengthens data literacy, accelerates quality improvement, and enhances patient-centred care. Moreover, it establishes a robust foundation for future advanced capabilities such as predictive analytics, machine learning, and AI enabled pattern detection to proactively guide clinical operations and resource optimization.

Modernizing Mental Health Act Documentation: Inspiring Change and Shaping Tomorrow Through Electronic MHA Forms

Presenter: Eva Ostapenko
Organization: Fraser Health

Mental Health Act (MHA) forms are legally mandated instruments that enable the involuntary and voluntary admission, assessment, and treatment of individuals experiencing significant mental health challenges. Accurate completion and timely management of these forms are essential to maintaining compliance with provincial legislation, protecting patient rights, and meeting Ministry of Health standards.

Historically, MHA forms at several sites have been completed using a paper-based client-server workflow, requiring manual documentation, physical storage, and tracking of expiry dates. This approach presents challenges related to audit readiness, standardization, and operational efficiency. In contrast, at some Fraser Health Authority Sites, we have successfully implemented electronic MHA forms within the Expanse (Full) electronic health record. These electronic forms are exact digital replicas of the approved paper versions and were reviewed and endorsed by the Ministry of Health prior to go-live, ensuring full legal and regulatory compliance.

This presentation describes the implementation approach, governance, and outcomes of the electronic MHA forms at FHA. Beyond digitization, this initiative reflects a broader commitment to inspiring innovation and creating meaningful impact – supporting clinicians with safer, more efficient workflows while shaping a more connected, compliant, and patient-centred future for mental health services.

Clinician-to-Provider Communication: A Surveillance Solution

Presenter: Dr. Kenneth Chan
Organization: Fraser Health

Building on our adoption of MEDITECH Expanse, we are designing and testing a standardized, auditable process for non urgent clinician to provider communication that leverages existing functionality across PCS, Web Acute, and Surveillance. Prior to Expanse, nurses and allied health documented non urgent information on paper notes placed at the front of the chart or within progress notes, and providers would sign to indicate the message had been read. As these paper processes transitioned to electronic workflows, teams began relying on sticky notes—a workaround that falls outside the legal health record and provides no confirmation that providers reviewed or acknowledged the communication.

Our emerging solution coordinates documentation and visibility across modules. Inpatient nurses document non urgent messages using a PCS intervention, while allied health and referral-based nurses document using Web Acute. These inputs are captured by the

Surveillance module, which then displays a notification on the Acute Status Board, where providers can click to view the details. After reviewing, providers can remove the item from their view, creating a reliable and auditable closed loop communication process. We remain in the build and testing phase, and early demonstrations to medicine providers have been well received, with feedback highlighting improved visibility and reliability over the current process.

This session will outline the design approach, configuration decisions, user engagement, and testing strategies that shaped this solution—demonstrating how existing Expanse tools can be leveraged to enhance communication and support patient safety.

Smartsheet as a Test Management Tool
Presenter: Neha Punjabi
Organization: Fraser Health

This presentation outlines the adaptation of Smartsheet, a collaborative work management platform, to function as a test management tool within the MEDITECH Expanse project. The QA team, responsible for coordinating testing efforts across multiple teams, required an efficient and cost-effective solution without the acquisition of new software. By customizing Smartsheet's templates, collaboration features, automation and reporting capabilities, the QA team, in consultation with Subject Matter experts, established a reusable and scalable framework to manage testing activities.

Key benefits included improved efficiency & process, enhanced coordination and communication, real-time metrics and cost savings.

While Smartsheet was not designed as a conventional test management system and required creative workarounds for advanced needs such as traceability and defect tracking, it ultimately proved to be a practical and flexible tool to manage software testing. This experience illustrates that with strategic customization, Smartsheet can be effectively repurposed for complex test management in collaborative environments.

Beyond the Email Trail: Closing the EMR Access Loop and Building Proactive Access Governance
Presenter: Bibi Selema
Organization: Fraser Health

Workforce change is constant. Staff are hired, change roles, or transition to other opportunities and each transition carries the implications for unauthorized access to electronic medical records (EMRs). When access governance does not evolve at the same pace as workforce movement, risk accumulates often unnoticed until an incident, or breach exposes the gap.

Historically, access governance has relied on assumptions that managers will notify the organization when staff are hired, change roles, or leave. In practice, these notifications are often delayed, incomplete, or never sent at all. Therefore, tracking access changes through email quickly becomes burdensome and unreliable leaving access teams to piece together workforce movement from limited data. This results in users retaining access to EMRs long after they have left the organization, quietly increasing privacy, security, and compliance risk.

This presentation reviews how role-based access control (RBAC) auditing workflow was designed to shift access governance from reactive to proactive. By integrating HR and EMR data, applying role-mapped logic, and leveraging automation, scripting, and pre-filtered reporting, the workflow creates a scalable, repeatable audit process. Human oversight remains central through quality assurance checks, while automation accelerates detection and correction of access misalignment to strengthen security without sacrificing operational efficiency.

This session presents an end-to-end RBAC access auditing framework used within Fraser Health Authority. Attendees will explore how data integration, scripting, and governance intersect to support continuous access assurance and audit readiness.

Building Bridges: Advancing Interoperability Between MEDITECH and Clinical Systems at Fraser Health

Presenter: Dominic Ko
Organization: Fraser Health

Interoperability is the cornerstone of a connected healthcare ecosystem, enabling seamless data exchange and improving patient care. At Fraser Health, we have embraced a strategic approach to enhance interoperability between MEDITECH and a diverse set of clinical systems. This presentation will showcase our journey – highlighting innovative integrations, including custom solutions and unique implementations.

We will explore how our integration strategies have allowed us to meet complex clinical needs while maintaining flexibility and scalability. Additionally, we will discuss how leveraging modern integration frameworks is shaping a connected ecosystem that supports real-time data flow across multiple platforms.

Join us as we celebrate our wins, share lessons learned, and outline our vision for expanding interoperability to create a fully connected healthcare environment within Fraser Health.

Leveraging Generative AI to Empower Clinicians and Elevate Patient Care
Presenter: Hamidreza Eslami
Organization: Fraser Health

Fraser Health is advancing clinical operations through the adoption of Generative AI (GenAI) to improve efficiency, reduce administrative burden, and enhance patient-centered care. In response to workforce shortages, increasing data complexity, and clinician burnout, two flagship solutions were implemented: the Advance Virtual Assistant (AVA) and the Predictive Discharge (PD) tool.

AVA, developed alongside the MEDITECH Expanse EHR implementation, is a conversational, context-aware support tool powered by large language models. It provides real-time guidance based on clinical reference materials, accelerating onboarding, reducing cognitive load, and promoting consistent, evidence-based workflows. Since deployment, AVA has supported over 3,000 clinicians across 23,000 interactions, achieving a 92% satisfaction rate and reducing onboarding time by 40%.

Complementing AVA, the PD tool uses machine learning to predict patient discharges within 24 hours by analyzing over 72 clinical and operational variables. Deployed across 12 acute care hospitals, PD has supported more than 130,000 patients, achieved over 88% accuracy, and contributed to a 4.6% increase in daily discharge rates.

Together, these solutions demonstrate Fraser Health's responsible, human-centered approach to AI-enabled healthcare transformation.

Key Objectives: To implement AI solutions that enhance clinician experience, accelerate EHR proficiency, and improve access and flow through predictive, data-driven insights.

Not Another Tech Story: The Trust Platform
Presenter: Annie Stadnek
Organization: Fraser Health

This is a digital health presentation that examines why technology initiatives succeed or struggle in clinical environments. Rather than focusing on the tools themselves, this session highlights how trust, shared understanding, and alignment with real clinical workflows are critical to sustainable change. Drawing on practical EMR and workflow experiences, it explores how clinician resistance and workarounds often signal design and relationship gaps. The presentation offers insights for digital health leaders, builders, and clinicians who want technology implementations that are effective, adopted, and trusted.