

EVIDENCE-BASED CARE PROGRAM

TO: All Staff

FROM: GBHN Order Sets Committee

DATE: October 16, 2007

SUBJECT: Change process for GBHN Order Sets

Please note the GBHN Order Set Committee has now approved a Change Request process for all Order Sets. As of December 1, 2007, any change request to GBHN Order Sets will go through this process. Until this time, changes can be submitted to any member of the GBHN Order Set Committee.

There are two pieces to the change request process. The first is the Change Request Flow Chart, which outlines the process for the change request. The second is a Change Request Form, which is to be filled out and sent to the Chair of the Order Set Committee to begin the change request.

Both of these documents are attached to this memo for reference, but can also be found on the GBHN Order Sets Website under "GBHN Process Documents". The form will be posted in Word format so that it can be filled out electronically or in printed form.

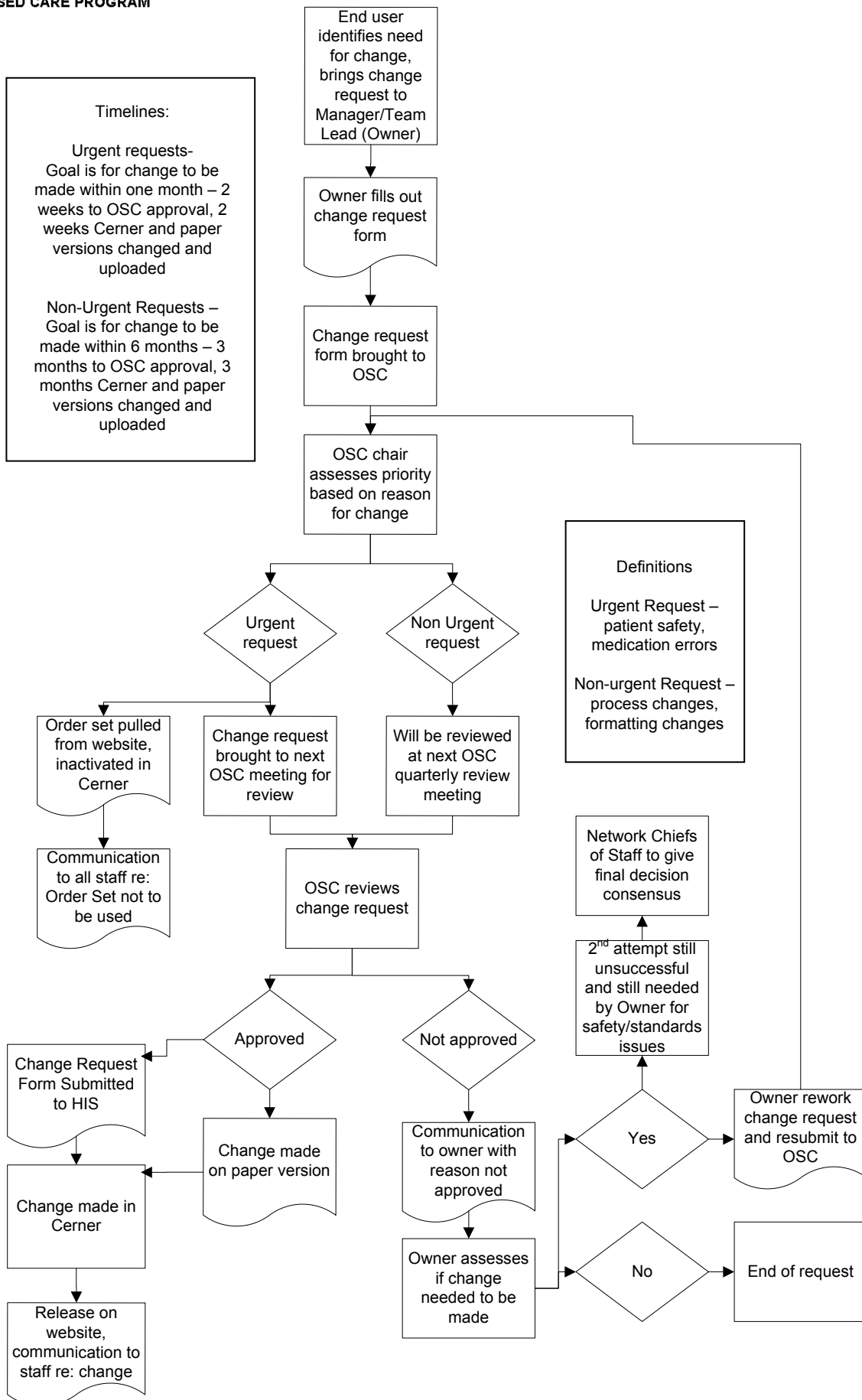
Any questions can be directed to any member of the GBHN Order Sets Committee.

Jessica Meleskie
Chair, Order Set Committee
Program Coordinator
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Grey Bruce Health Network

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Change Request Flow Chart – GBHN Order Sets

October 2007



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GBHN Order Sets Change Request Form

Order Set Name/Version:	
Requested by:	Date Submitted:

Change Request:

Proposed Change Description

Justification

Benefits

State the problem the requested functionality would solve

Impact Statement

- | | | |
|---|--|--|
| <input type="checkbox"/> Change in Evidence | <input type="checkbox"/> Financial risk | <input type="checkbox"/> Process Change |
| <input type="checkbox"/> Compliance risk | <input type="checkbox"/> Patient safety risk | <input type="checkbox"/> User satisfaction |
| <input type="checkbox"/> Correction | <input type="checkbox"/> Privacy risk | <input type="checkbox"/> Workflow |

Education

End User Education Required:

Change Request Sign-Off Checklist:

Please document the names and professional designation of the individuals consulted regarding this change. All relevant stakeholders must be involved in the change of order set/clinical protocols.

Name	Professional Designation	Health System/Department

Approvals

	YES	NO	DEFERRED
GBHN OSC Chair Signature:			
	YES	NO	DEFERRED
HIS Signatures:			

*Deferred will move this outside the scope of the project and the Order Set Committee will refer to the appropriate area.

Send to: Jessica Meleskie, Chair, GBHN Order Set Committee via email at jmeleskie@gbhs.on.ca; fax at 519 364 6602; or interoffice mail to Hanover and District Hospital.