

PURPOSE

To define the standard process for the development and approval of **order sets** (previously referred to as pre-printed orders [PPO]) across the BC Children's Hospital and Women's Hospital and Health Centre site (C&W)

DEFINITIONS

Bolded, italicized terms found in this policy, whether in single or plural form, refer to the following definitions:

Order Set means a standard, pre-defined order (or set of orders) which is provided in electronic format and to be printed on-demand, and have been developed and approved according to this policy. The order, or **order set**, contains medication or medication-related orders which, together, are considered to comprise a medication therapeutic intervention for the designated clinical circumstance. (Previously known as a Pre-Printed Order [PPO])

High Alert Medication means any medication designated by the C&W Pharmacy, Therapeutics & Nutrition Committee (PT&N) as a medication whose use represents a significantly elevated potential for patient harm, including system error potential

Requestor/Primary Authors lead the **order set** development and may include more than one health professional. Ideally the **primary authors** would include a physician, nurse and clinical pharmacist from the specialty area. This is particularly relevant with the creation of a new order set. For small and minor changes, the primary author may be a single individual

Stakeholders are all individuals or services whose practice will be directly influenced by the **order set**. **Stakeholders** may include but are not limited to Physicians, Nurses (leadership and front-line), Laboratory, Respiratory Therapists, Pharmacists, Physiotherapists, and Dieticians etc. **Stakeholders** should be contacted when content of the **order set** will impact their department/service differently from normal practice. External Stakeholders e.g. Child Health BC can also be consulted when applicable

An **independent review** is a formal review of an **order set** draft by **stakeholder** clinicians with expertise in the subject. The review should be completed separately from the **order set** author and, upon completion, involve a communication to reveal their critique and make changes to **order sets** accordingly. In particular, issues related to patient safety are of paramount concern. When the **order set** contains medications, a pharmacist should conduct an independent review similarly with lab, medical imaging etc.

A **second independent review** occurs only on order sets with High Alert Medications. This review is done by a **stakeholder** with clinical knowledge of the **order set**

A **Clinical Informatics Specialist** is a clinical member of the C&W Clinical Informatics Department responsible for the ongoing maintenance of the central repository of **order sets** for C&W. They are responsible for providing support to members of the working group and **stakeholders** who are participating; and coordinating the **independent review** of the **order set**. Clinical Informatics will ensure the **order sets** are formatted to the approved style guide, before publishing and maintain all order set resources on ePOPS

SITE APPLICABILITY

All C&W Services or Programs

POLICY

The development and approval of all order sets by the PT&N committee (or the NICU Pharmacy & Therapeutics (P&T) sub-committee for order sets that will be used in NICU ONLY) will follow the standardized process as outlined:

In Scope

- All medication-related prescriptions or **order sets**, including other associated medication-related orders such as fluid therapies, laboratory, patient monitoring orders, patient care, patient activity etc.
- Fluid or acid-base orders, including general fluid orders and hydration orders associated with the treatment of the stated clinical condition
- Nutritional orders, including all standardized parenteral nutrition, oral or parenteral concentrated electrolytes, general diet orders, infant or enteral formula, or other special nutrition supplements (e.g. formula powder or modular nutrition products)
- Radiological orders with or without medications or contrast media

PROCEDURE

All steps in each stage must be completed prior to moving forward

Initiation of New Order Set Development

1. **Requestor** to access ePOPS for Order Set Protocol and Procedures, Order Set Template and Order Set Style Guide, publishing process and PT&N (or NICU P&T sub-committee) meeting schedule and submission deadlines: <http://policyandorders.cw.bc.ca/>
2. **Requestor** to initiate **order set**. Contact Clinical Informatics Specialist at ordersets@cw.bc.ca for direction or guidance if needed
3. **Requestor** to identify working group members (**Primary Authors**) to act as participants to document creation and/or review
4. **Requestor** to identify content experts to act as consultants
5. **Requestor** to identify stakeholders who may be impacted and need to review the document
6. **Requestor** to describe patient/family input (past or present) and future input plans, if applicable
7. **Requestor** to develop communication and education plan (if practice change then complete practice update form)

Development & Consultation

8. **Requestor/Primary Authors** to develop first draft
9. **Requestor/Primary Authors** to review with stakeholders identified in Step 5
10. **Requestor/Primary Authors** revise based on feedback collected from stakeholders
Repeat 9 and 10 as needed and/or according to stakeholder engagement plan
11. **Requestor/Primary Authors** to complete Order Set Request Form, and finalize **order set** and accompanying document(s) (if applicable) with all working group members
12. **Requestor/Primary Authors** to send draft **order set** to the **Clinical Informatics Specialist** at ordersets@cw.bc.ca
13. **Clinical Informatics Specialist** reviews and edits **order set** and Request Form then emails revised version back to the **Requestor/Primary Authors**
14. **Requestor/Primary Authors** updates/consults/gets approval with working group/content experts/**stakeholders** for any changes to content, as appropriate
15. **Requestor/Primary Authors** email final draft version to **Clinical Informatics Specialist**
16. **Clinical Informatics Specialist** to send **order set** for **independent stakeholder review**

17. **Independent Stakeholder Reviewer** sends back to **Clinical Informatics Specialist** with feedback then approval for submission to PT&N Committee (or NICU P&T sub-committee for NICU ONLY sets)
18. **Clinical Informatics Specialist** to inform **Requestor/Primary Authors** that **order set** is ready for submission
19. **Requestor/Primary Author** sends complete Order Set Request Form *and* finalized **order set** and any accompanying documents to **Clinical Informatics Specialist** by the submission deadlines

NOTE: Incomplete request forms will not be submitted to PT&N (or NICU P&T sub-committee) (including insufficient *stakeholder* review). The **order set will be returned to the **Primary Author** group to be completed. Failure to submit complete request forms by the deadlines for both independent review and PT&N (or NICU P&T sub-committee) agenda will result in the deferment of presenting the **order set** for approval**

20. **PT&N (or NICU P&T sub-committee)** reviews with approval/denial decision at the meeting
If not approved then repeat steps 9-13 according to feedback from committee

Initial Approval of Order Set & Accompanying Documents Approved at PT&N (or NICU P&T sub-committee)

21. Upon PT&N/ NICU P&T approval of the **order set**, **Clinical Informatics Specialist** to assign/update version, approval and expiry dates on the **order set**
22. **Clinical Informatics Specialist** adds or updates **order set** to archives and Master Repository
23. **Clinical Informatics Specialist** to publish the **order set** to ePOPS

Order Set & Accompanying Documents Posted Published

24. **Clinical Informatics Specialist** communicates with **requestor/primary authors** when posting to ePOPS complete
25. **Requestor** to roll out communication and education plan as per details on request form
26. **Requestor** to ensure Communication and Knowledge Translation Plan in action to inform practice update

Metrics Evaluation Provided to Requestor

27. **Clinical Informatics Specialist** to provides metric report to PT&N (or NICU P&T sub-committee) to support evaluation and Knowledge Translation Plan

Changes to Existing Order Set

1. **Requestor** to access ePOPS for Order Set Request Form, Order Set Style Guide, publishing process and PT&N meeting schedule and submission deadlines: <http://policyandorders.cw.bc.ca/>
2. **Requestor/Primary Authors** identify change(s) required on existing order set and submit with completed Order Set Request Form to **Clinical Informatics Specialist** at ordersets@cw.bc.ca
3. Follow Steps 13-26 of New Order Development process

3-year Review of Order Set

1. **Clinical Informatics Specialist** to initiate review 3 months prior to order set expiration date with the **Primary Author(s)**.
2. **Primary Author** to initiate the same process as “Changes to Existing **Order Set**.”
3. If **Clinical Informatics Specialist** is unable to make contact with the Program or Service, **Clinical Informatics Specialist** will escalate to Best Practice and Medical Director to identify a **Primary Author** to maintain best practice standards of up-to-date **order sets**.



BC WOMEN'S
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HEALTH CENTRE



ORDER SET PROTOCOL AND PROCEDURES

ORDER SET FORMAT

Refer to the C&W Standardized Order Set Style Guide (2018)