Health Information Technology (HIT): Change and Performance Frameworks

Terry Hill
Executive Director
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The Challenge of Change
Change – What We Know!

- Increasing at an exponential rate
- Has both dangers and opportunities
- Assimilate change at micro, organizational, and macro levels
- Increasingly people are hitting their “future shock” threshold
Future Shock

That point in time when people can no longer assimilate change without displaying dysfunctional behavior

• Based on the work of Alvin Toffler
Goal

• Raise the future shock threshold
  - Education
  - Increase resilience during change
• Use fewer assimilation points during change
  - Implement change more effectively

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Change as a Process
Change as a Process

Present State → Transition State → Desired State

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Transition State Characteristics

• Low stability
• High emotional stress
• High, often undirected energy
• Control becomes a major issue
• Past patterns of behavior become highly valued
• Conflict increases
Change as a Process

Present State ➔ Transition State ➔ Desired State

Learning

Pain

“Danger”

Remedy

“Opportunity”

Based on the work of ODR, Inc.
Basic HIT Assumptions

- Rural hospitals are extremely complex
- Electronic health record (EHR) adoption will be very difficult, requiring a multi-faceted, coordinated approach
- Reaching meaningful use will require profound change with a change-ready culture and effective, resilient leadership
- Change is most effectively accomplished through change management frameworks and business tools
Steps to EHR Implementation

- Policies
- By-laws
- Process flows
- Readiness assessment

- Vision
- Goals and objectives
- Benefits
- Measureable outcomes

- Define requirements
- Identify vendors
- Develop RFP

- Project resource plan
- Project budget
- Governance
- Testing

- Project management
- Workflow design
- Clinician engagement
- Communication

- On-going support
- Optimization
- Enhancements
- Upgrade planning
KHA REACH TECHNICAL ASSISTANCE ROADMAP OVERVIEW

This roadmap will be used to develop a work plan modified for each organization to reflect its stage of EHR migration.

### Assess
- **Awareness**
  - Why EHR: Myths & Realities
  - What is EHR & Meaningful Use (M.U.)
  - REACH role
  - REACH process
  - EHR Vision

### Plan
- **Organize/Project Governance**
  - Steering Committee
  - Project Management
  - Physician Champion
  - Job Descriptions & Documentation
- **Facilitated Planning**
  - Stakeholder Visioning
  - SMART Goals
  - Change Management
  - Total Cost of Ownership & Business Case
  - I.T. Acquisition Strategy
  - Chart/Data Conversion
- **Work Flow/Process Analysis**
  - Work Flow Training
  - Work Flow Review
  - Requirements Specs

### Implement/Optimize
- **Project Mgr Training**
  - Issues Management
  - Change Control
  - Team Building
  - Contingency Planning
- **Vendor Implementation Gap Analysis**
  - Implementation Plan
  - Roll Out Strategy
  - Training Plan
  - Testing Plan
  - Functionality
  - Evidence-Based Guidelines
  - Std Vocabulary
  - Core Data Sets
  - H/W Architecture Design
  - I/O Devices
  - Archive & B/U
  - Interoperability
  - Connectivity
  - Privacy & Security Documentation
  - M.U. Criteria
  - Super User Training
  - Installation
  - H/W (Certification)
  - S/W Install
  - Network/Telecomm
  - Upgrades/Interfaces to Existing Systems
  - Work Flow/Process Redesign
  - Physical Layout
  - Communicating w/Pts
  - Work Flow Changes
  - Interface Development
  - Skills Building

### Implement/Optimize
- **System Build**
  - Master Files/Tables
  - File Clean Up
  - Data/Codes Mapping
  - Screen Layout
  - Templates/Order Sets
  - Clinical Decision Support (CDS)
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- **Testing Plan**
  - Roll Out Strategy
  - Training Plan
  - Testing Plan
  - Functionality
  - Evidence-Based Guidelines
  - Std Vocabulary
  - Core Data Sets
  - H/W Architecture Design
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  - Skills Building

### Meaningful Use/Improve
- **EHR Process Improvement**
  - Incentives
  - M.U. Attestation for 2011
  - M.U. Data Submission for 2012
  - Benefits Realization
    - Clinician Satisfaction
    - Patient Satisfaction
    - Monitoring Goal Achievement
    - Root Cause Analysis
    - Quality Improvement
    - Patient Safety
    - Return on Investment
  - Ongoing Maintenance
    - Patches/Upgrades
    - User Preferences
    - Hardware Upgrade & Maintenance
    - CDS Maintenance
  - Health Info Exchange
    - Interoperability
    - HIO, NHIN
    - Public Health
    - Biosurveillance
    - Personal Health Record
    - Disease Registries
    - Patient Centered Medical Home
    - Clinical Trials

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Key Health Alliance

Regional Extension Assistance Center for HIT (REACH) for MN and ND

DRAFT 2.3
04.29.10
Valley of Despair

- **Leadership and Management**: Determines how long you’re in the valley of despair.
- **Implement EHR**: Implemented and Supported
- **Little or No HIT**: Determines level of productivity and satisfaction
- **Choices, Planning, Execution**: Determines extent of Slide
- **Preferred Future**: Good Choices and management
- **Possible Future**: Time
Essentials for HIT Adoption

As identified by the National Rural HIT Coalition:

• Leadership must be engaged
• Medical staff must be involved
• Strategic planning is crucial to success
• Culture change is required
• HIT requires process redesign
• Networking is necessary
Challenges in HIT Adoption

• Extreme HIT workforce shortages
• Education of staff and technicians
• Financial obstacles for HIT purchases and operations
• Rapid progress needed to achieve meaningful use
• Managing organizational change
Frameworks for Managing Performance and Change

Baldridge Health

Balanced Scorecard

Studer
Baldridge Health Care Criteria for Performance Excellence Framework

1. Leadership
2. Strategic Planning
3. Focus on Patients, Other Customers and Markets
4. Measurement, Analysis, and Knowledge Management
5. Workforce Focus
6. Process Management
7. Results
Definition of Balanced Scorecard

- The Balanced Scorecard is a framework that helps hospitals successfully carry out a balanced set of organizational strategies that drive both behavior and performance.
As financial stakeholders, how do we intend to meet the goals and objectives in the hospital’s Mission Statement?

As customers of the hospital’s services, what do we want, need or expect?

As members of the hospital staff, what do we need to do to meet the needs of the patients and healthcare community?

As an organization, what type of culture, skills, training and technology are we going to develop to support our processes?

Increased revenue

Increased market share

Increased margin to fund mission

Increased cost efficiency

Patient safety outcomes

Physician satisfaction

Patient satisfaction

Clinical processes

Business processes

Operational processes

Ensure a skilled workforce

Establish an empowering work culture

Acquire needed HIT systems

Ongoing education

Acquire HIT expertise

Leadership

Instill change management

Community health outcomes

Finance

Customers & Community

Internal Processes

Learning & Growth
Studer Principles

• Commit to excellence
• Measure the important things
• Build a culture around excellence
• Create and develop great leaders
Studer Principles

• Focus on employee satisfaction
• Build individual accountability
• Align behaviors with goals and values
• Communicate at all levels
• Recognize and reward success
Terry Hill

Executive Director
National Rural Health Resource Center
600 East Superior Street, Suite 404
Duluth, MN 55802
(218) 727-9390 ext. 232
thill@ruralcenter.org