

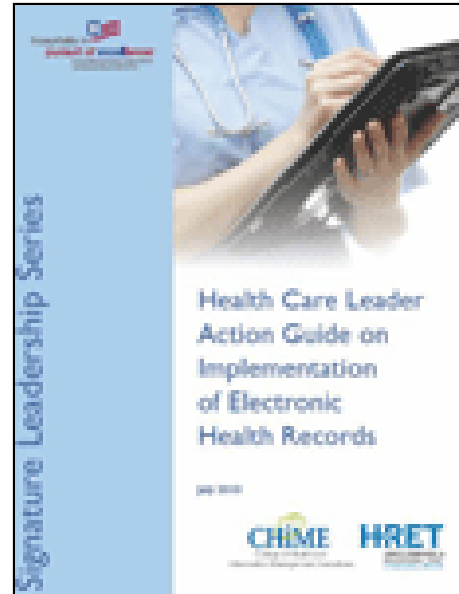
# Health Care Leader Action Guide on Implementation of Electronic Health Records

July 2010



TRANSFORMING HEALTH CARE THROUGH RESEARCH AND EDUCATION





*Health Care Leader Action Guide on Implementation of Electronic Health Records.* Chicago, IL: Health Research & Educational Trust and College of Health Information Management Executives, 2010. Access at <http://www.hpoe.org/hpoe/reports-guides.shtml#health>.

# Electronic Health Record

- The Electronic Health Record (EHR) is a longitudinal electronic record of patient health information generated by one or more encounters in any care delivery setting.
- The EHR includes patient demographics, progress notes, problems, medications, vital signs, past medical history, immunizations, laboratory data and radiology reports.
- The EHR automates and streamlines the clinician's workflow and supports other care-related activities via interface -- including evidence-based decision support, quality management and outcomes reporting.

*Source: Healthcare Information and Management Systems Society's EHR definition*

# HITECH Act

- Health Information Technology for Economic and Clinical Health (HITECH) Act
  - Set of incentives/penalties for adoption and use of certified EHR Systems
  - By 2015, hospitals/physician offices must implement and meet “Meaningful Use” requirements
  - Before 2015, provides Medicare incentive payments (\$14-27 billion)
  - Funds HIT adoption through Regional Extension Centers and state-level health information exchanges

# Incentive Payments

- Payments can be made only to eligible hospitals and eligible providers, as defined by legislation
- Providers must use certified technology to qualify
- Providers must demonstrate “meaningful use”
- CMS requirements in five areas:
  - To improve quality, safety, efficiency, and reduce health disparities
  - Engage patients and families in their health care
  - Improve care coordination
  - Improve population and public health
  - Ensure adequate privacy and security of health information

# Incentive Payments (contd.)

- Some hospitals and physicians will also be able to access funds through state Medicaid programs, including funds in the first year to support adoption, installation, and upgrading of certified EHRs without having to meet the meaningful use requirements.
  - Program is optional for states and is limited to hospitals and physicians that meet specific thresholds of Medicaid patient volume.

# Implementation Roadmap

- Gather executive team
- Develop strategic plan integrating IT
- Perform gap analysis
- Develop high-level project plan
- Initiate culture change
- Redesign workflow processes
- Implementation

# Tips on Gathering a Team

- Have visible backing from CEO and other senior executive team members
- Establish close working relationships between CIO and CFO
- Encourage participation of CIO in educational activities (HITECH/ARRA and state provisions)
- Have CIO play lead role in authoring/updating IT strategic plan that supports organizational strategic plan
- Involve CIO in efforts to keep organization informed about progress (e.g., taskforce for achieving meaningful use)
- Consider new roles – Chief Medical or Chief Nursing Information Officers



# Planning Tips

- The IT plan is part of the foundation for the organization's pillars – quality, service, finance, people, growth, community
- Use existing committees (e.g., EHR Steering Committee) or form cross-functional committee
- Task senior leaders to get involved in aspects of the assessment where appropriate
- Conducting gap analysis involves assessment of corporate readiness for change and requires a game plan to assess people and processes
- Measure progress, gaps and work to be done on a scorecard or “readiness matrix” that visually presents the work that lies ahead

# Culture Tips

- Communication from the CEO sets the tone and links the project to the overall vision of the hospital
- Project champions should be tasked with communicating progress to their departments
- Physician communication requires special attention and effort
- Absolute transparency and honesty are critical to maintaining credibility
- Provide a non-threatening way of giving feedback after implementation
- Milestone events merit celebrations

# Workflow Redesign

- Understand the steps in each process and how they connect with one another and to the organization's goals
- Begin with process mapping to determine the workflow and observe the actual processes to understand workarounds
- Examine major processes (e.g., medication refills, appointment requests) with an eye towards how IT can be used to automate certain steps
- When redesigning steps, get input from front-line caregivers
- Always keep the patient in mind

# Implementation

- Training should accommodate differences in people's comfort with IT
- Training should begin before implementation with support available after implementation
- Two options for “Going Live”
  - Rapid deployment requires significant planning and change management and resources to deal with problems as they emerge
  - Staged implementation allows organizations to discover and solve problems before system-wide implementation
  - Both require clear communication about timelines, training, and support

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