

Healthcare Organizational Transformation (HOT) with Electronic Collaboration

This Project will transform how healthcare organization stakeholders interact during IT implementation by leveraging proven change management methods with electronic collaboration tools to improve efficiency and satisfaction by 10X.

Team Members and Areas of Expertise	Gordon Bleil MD - clinical	Chief for Medical Information Services at a small community hospital. EHR and LEAN methodologies focus
	Mary McConville - process design	Sr. IT Product Quality Analyst for a mid-size health insurer. IT methodologies organizational change management tools
	Marc Stearman PA-C - administration	Director of Medical Informatics at a community hospital with a fledgling eICU technology.

Project HIT directly impacts clinical users but most clinicians are IT-naïve. Early immersion into this medium with enticing online tools can facilitate collaboration within proven change management practices. Stakeholders will be more inclined to participate and contribute specifically because this optimizes their methods of communication and use of time. The organization will improve its overall function both short and long term. In particular, this approach can reduce prototyping time for templates and processes while being more inclusive of the important expectations of providers during a HIT eICU implementation. This project aims to equip the organization with communication methods and management practices that expose information and encourage feedback into the organizational wisdom to bring in the eICU smoothly. The tiered project management/communication structure will maintain appropriate levels of confidentiality.

Basis of Change	Disruptor				
	Social Networking	Template worksheets	Virtual meetings/IM	Scheduling/Calendar	Optimize the Whole*
Extent of user involvement	'Go to' site pers/bus info	Flexible - invite, include & encourage	Less time needed to attend	'Go to' site work schedule & trading	Extends across departments
Project collaboration	Rapid prototype turnaround	Version control & standardization	Rapid exchange of ideas	Scheduling of milestones	Develops cells of user cooperation
Problem resolution	Rapid access to HOT knowledge	Modeling with standardized tools	Rapid access to key personnel	Coordination of time & personnel	organizational > departments
Basic IT Competencies	Immersion in IT	Standards and methods	maintain direct personal contact	Primary driver for user access	Requires skills for adequate function
Advanced IT competencies	Immersion in IT	Process development	Opportunity for advancing ideas	advanced info management	Challenges users skills

*Optimize the Whole, Not Necessarily the Pieces - projects to improve the overall organizational even if not optimal for departments.

Metrics Our metrics will flow from the online resources' tracking capability and from a comparative study of the eICU project and two similar clinical implementation projects.

Measurement Approach	Metrics Focus
Stakeholder Engagement	Track site visits, views and posts and analyze for distribution of roles Compare number and extent control projects participants
Comparison Baseline	Survey to participants of control groups before and eICU group after Records review for meeting attendance, costs, issues and rework

Stakeholder Value Analysis Stakeholders include clinicians, administrator/business personnel, operations/IT staff. Physicians will have the greatest value exchange with less meeting time, better satisfaction through system understanding and effective input. They have traditionally had information filtered and been given latitude on their response time, so rapid turnaround and structured communication may be perceived as loss of autonomy. Administrators may feel both pleased and challenged by greater feedback, user involvement, and less cost, especially with meeting time. Other departments will have similar trade-offs. It will be very important in this process to ensure that stakeholder concerns are gathered, organized and addressed so that the organization can use the information to move forward.

Stakeholders	Time Savings	Involvement	Control	Time to Respond
Clinician		UP	Down*	Down
Other Service Delivery	Varies	UP		Down
Administration	UP	UP	Down	Down
Project Management Team	Down	UP	Down	Down

Green arrow – gains; Red arrows - losses

* physicians in particular

Stakeholder Value Proposition This HOT project aims to save time and the cost of rework due to miscommunication, increase clinical innovation and support a culture of inclusion. In exchange for less autonomy, it will provide a readily accessible forum to clarify expectations, exchange ideas and document progress. The hospital will more quickly design care processes and enjoy a more thorough implementation of the eICU using decision-supported communications and education delivered online. It will provide direct value for the organization's immediate mission, but the value of improved stakeholder engagement will multiply as this pilot program is extended.