

## Unit 9 - Potential Issues with Adoption and Installation of an HIT system



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## Objectives

- Identify frequently encountered challenges to adoption and implementation of HIT systems
- Propose solutions to common problems in the implementation of HIT systems.
- Design a plan to address barriers to implementation of an HIT system.



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## Why Do Systems Fail?

- Systems can "get in the way". Is it useable?
- Lack of the story metaphor
  - Narratives are essential to a patient's episode of illness
  - Poor communication is more often detrimental to patients than lack of knowledge
  - Computers should enable clinicians to capture narratives easily
  - The structure of the patient's record strongly influences the ease of information retrieval

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## Understanding Critical Success Factors

- User Characteristics
  - Cognitive style, personality, demographics, situational variables, attitudes, expectations
- System Design Characteristics
  - Hard/software performance, learning, decision-support, usability, GUI
- · Organizational Characteristics
  - organization culture, top level support, commitment



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## Common Challenges to Adoption & Integration of HIT

- · Hard to enter data
  - Free text isn't
  - Structured text
    - Tough on the front end
    - Easier on the back end



- 40% slower on line



"If the computer is used to generate output, the layout and structure of the reports are important as this can influence clinical decisions in sometimes fundamental ways."

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# Effect of Presentation Order – "Primacy Effect"

• A: Diabetic Medication X

This medication is effective; it lowers sugar levels. It makes one feel better and boosts energy. It may cause nausea and headache.

• B: Diabetic Medication Y

This medication may cause headache and nausea. It boosts energy and makes one feel better. It is effective; it lowers sugar levels.

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## Common Challenges to Adoption & Integration of HIT

- Funding Who pays? Who benefits?
- Workflow and culture (resistance to change) are two key barriers to adoption
- Degree of turnover in healthcare.

## Culture Eats Strategy for Lunch

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## The Three T's

Team	Tactics	Technology
Mentify one or more EMR champions or don't implement.     Make sure your organization's senior executive fully supports the EMR.     Use an experienced, skilled     Use an experienced, skilled     Use an experienced, skilled     Wister sound champion management principles.     Make sure users share your goals.     Make sure users share your goals.     One try to implement     Contry to implement     Contry to implement     Constitutional	- Plan, plan, plan, - Redesign your workflow Don't automate processes just because you can; make sure the automation improves something Design a balanced scanning strategy Cestatestly exher key data into your new EHR charts Get data may the DRP description when possible Train, Itan, Itan, Itan, - Be flexible in your documentation strategy and allow individual differences in style Don't "go live" on a Monday Upther your workload when your "go live" and for a short period afterward Don't understant how much time and work is involved in becoming "expert" with an EHR Don't understant how much time and work is involved in becoming "expert" with an EHR Utilize "Foom train" at each size understant of support Utilize "Foom train" at each size understant of support Utilize "Foom train" at each size.	Don't scimp on your II infrastructure.     If you're a small practice, consider an application of the properties of the provider (ASP) model white sure that your II personnel do adequate to the provider it comes to servers and it comes to servers and networks.     Make sure your servers and interfaces are maintained on a daily basis.     Back up your database at least daily.     I want to be a sure your database at least daily.

Adler K. How to Successfully Navigate Your EHR Implementation; Family Practice Management. 2007 February.

Available from: <a href="http://www.aafp.org/fpm/2007/0200/p33.html">http://www.aafp.org/fpm/2007/0200/p33.html</a>

AVailable from: http://www.aatp.org/rpm/20u//uJUU/pss.ntm

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Table 3 Perceived barriers and related possible interventions  Perceived barrier  Possible barrier-related intervention strategies			
A	Finance	Positive Darrierrealized incorrenation strategies Provide documentation on eleut on investment Show profitable examples from other (BMR implementations, Provide financial comprensation,	
В	Technical	Educate physicians and support coupsing training. Adapt the system to existing practices implement IMM on a module-by-module basis. Link EMM with editing system. Permote and communicate reliability and availability of the system. Acquire their dawy for support cluring implementation,	
C	Time	Provide support during implementation phase to convert records and assist. Provide training sessions to familiates users. Implement a user friendly help function and help desk. Redesign workflow to achieve a time gain	
D	Psychological	Discuss sudilivers of the EMRI include trail period Demonstrate ease of use. Sum with voluntary use, Let fellow physicians demonstrate the system. Adapt system to current medical practice.	
E	Social	Discuss advantages and disadvantages for doctors and patients. Information and support from physicians who are already used. Ensure support, leadership, and communication from management.	
F	Legal	Develop requirements on safety and security in cooperation with physicians and patients. Ensure GMR system meets these requirements before implementation. Communication safety and security of issues.	
G	Organization	Redesign workflow to realize a better organizational fit. Adapt IMR to organization type. Adapt IMR to type of medical practice	
н	Change process	Select a project champion, preferably an experienced physician. Let physicians (or representatived participate during the implementation process. Communicate the advantages for physicians. Use incentives. Enuire support, leadership, and communication from management.	
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### **ToolKits**

- AHRQ Emerging Lessons Toolkit:
  - http://healthit.ahrg.gov/portal/server.pt/community/ahrg-funded\_projects/654/emerging\_lessons/11227
- AAFP: HIT in the Small Office Online Tutorials

   http://www.centerforbit.org/online/chit/home/cme-learn/tutorials.html

  HIMSS Flyer Getting Started With An EHR
- - http://www.himss.org/content/files/GettingStartedEMR\_Flyer1.pd
- ACP: EHR Adoption Road Map and Tools
   http://www.acponline.org/running\_practice/technology/ehr/roadm
- HRSA Implementation Tool Kit
  - http://www.hrsa.gov/publichealth/business/healthit/toolbox/Health



## This completes Unit 9

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- Boonstra A, Broekhusis M. Barriers to the acceptance of electronic medical records by physicians from systematic review to taxonomy and interventions. BMC Health Services Research 2010, 10:231 Available from: http://www.biomedcentral.com/1472-6963/10/231
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