

The resources, knowledge, and experience required for a successful clinical transformation initiative are immense. So are the risks. Only a collaborative, “partnering” relationship among the system buyer, the system vendor, and the clinical transformation consultant can devote sufficient time and resources, and the right methodologies to drive the Clinical Information System to its desired future state.

Not even the most self-aware and IT-savvy health care provider would think of tackling a clinical information system (CIS) implementation without some level of outside assistance. The depth and breadth of knowledge and experience, and the availability of dedicated resources required for such an undertaking, are extensive. There's substantial risk of failure, and risk that a system will lack functionality or deliver too few benefits to justify its expense.

The health care provider usually turns to the clinical systems vendor to complement their own internal resources with technical expertise, expert knowledge of their own clinical applications, and ongoing application support. Under pressure to remain price-competitive, clinical systems vendors will typically propose only a small amount (10 to 15 percent) of the total effort required to successfully transform clinical processes and implement the CIS. The health care providers either must dedicate the additional resources required (assuming they are available), expand the resources from the vendor, or engage a consultant with experience with clinical transformation.

If the goal of the project is clinical transformation, success is often too big a burden to be shared between the provider and clinical systems vendor alone. A successful clinical transformation needs more. It needs the kind of support only available from consultants who have become specialists in implementing and integrating clinical transformation initiatives. These third-party firms can provide knowledge and methodologies that begin by assessing the magnitude of the challenge and benefits, follow up with a detailed plan of action, and conclude with a successful clinical transformation. The chosen firm should also know how to

create and facilitate a collaborative relationship among the three "partners" of a clinical transformation initiative that is bound for success.

What Is "Partnering?"

"Partnering" describes a mutually beneficial relationship among separate business entities, whereas a "partnership" often involves legal and/or contractual obligations. Partners accept the roles and responsibilities in which they excel, and collaborate with the other partners toward common goals. The health care provider may want to ensure that each partner has appropriate financial incentives based on measurable objectives.

What Each Partner Brings to the Table

Figure 1 shows how each partner can bring to the table its core competencies, and takes on roles and responsibilities that complement the capabilities and expertise of the other partners. The objective is for each partner to deliver its core capabilities and resources in a collaborative environment in which each team member contributes his best work.

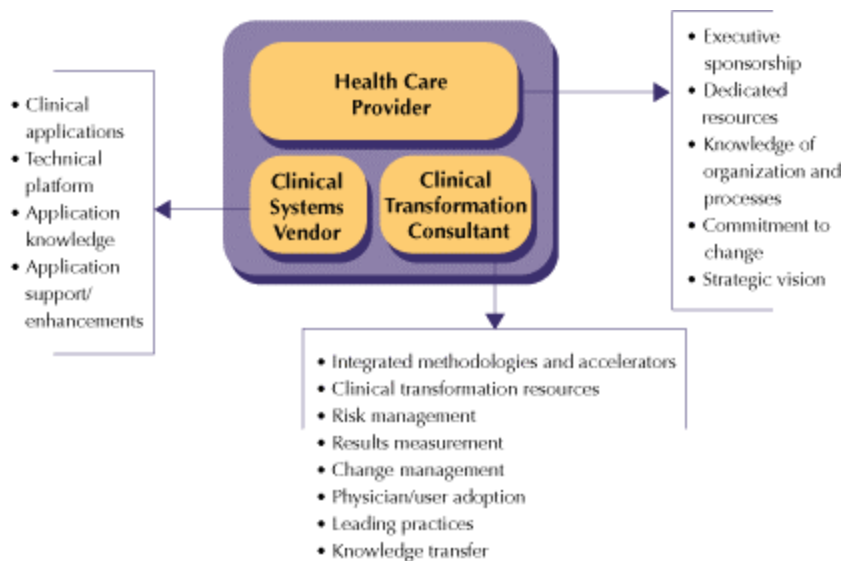


Figure 1: Project Partners' roles and responsibilities

The health care provider is, of course, the primary beneficiary of the partnering arrangement and takes on much of the responsibility for establishing a strategic vision and ensuring that executives and decision makers, including the clinical staff, are committed to making the necessary changes.

The organization and its leadership must dedicate the time and effort adequate to succeed with such a risky, mission-critical implementation. It brings to the table deep knowledge of its own clinical processes and practices, and the willingness and resources to change them. The health care provider must dedicate sufficient IT, clinical, and other user resources for a successful implementation.

The clinical systems vendor is primarily responsible for installing the CIS software applications and providing resources during the implementation with application and technical platform knowledge. Clinical systems vendors typically do not possess the knowledge or experience to redesign or transform the clinical processes their applications will automate. They typically do set the stage for these activities with their initial process assessments.

The consulting firm specializing in clinical transformation should bring the following to the table:

- ?? Methodologies and support for program, project, and risk management.
- ?? Knowledge and expertise to redesign clinical and revenue processes and practices to clinical transformation standards.
- ?? Integrated methodologies and project accelerators to achieve maximum benefits in minimum time.
- ?? Knowledge of leading practices.
- ?? Practical experience from previous implementations.
- ?? Proven methods for getting physicians to collaborate on and adopt clinical systems.
- ?? Clinical expertise and clinical group facilitation skills.
- ?? Expertise in transferring knowledge throughout a project's working groups.

Consultants combine thorough knowledge of the CIS vendor's products with clinical expertise to move beyond technical innovation to clinical transformation. The consultant serves as an objective third party to ensure that requests from the health care provider to the vendor are realistic and that vendor promises are kept.

The consultant's major contribution is risk management. Clinical transformation is a risky project. It is time sensitive. There are many people and a lot of dollars involved. The health care provider can't afford missteps. Assisting with organizing the project, keeping it on track, establishing and meeting milestones, planning for success, energizing clinicians to become enthusiastic participants in the transformation process — all these tasks require the expertise of a consultant. Since an assessment of the provider's current capabilities and challenges is necessary for a plan that guides the project to success, the consultant should be brought into the project as early as possible.

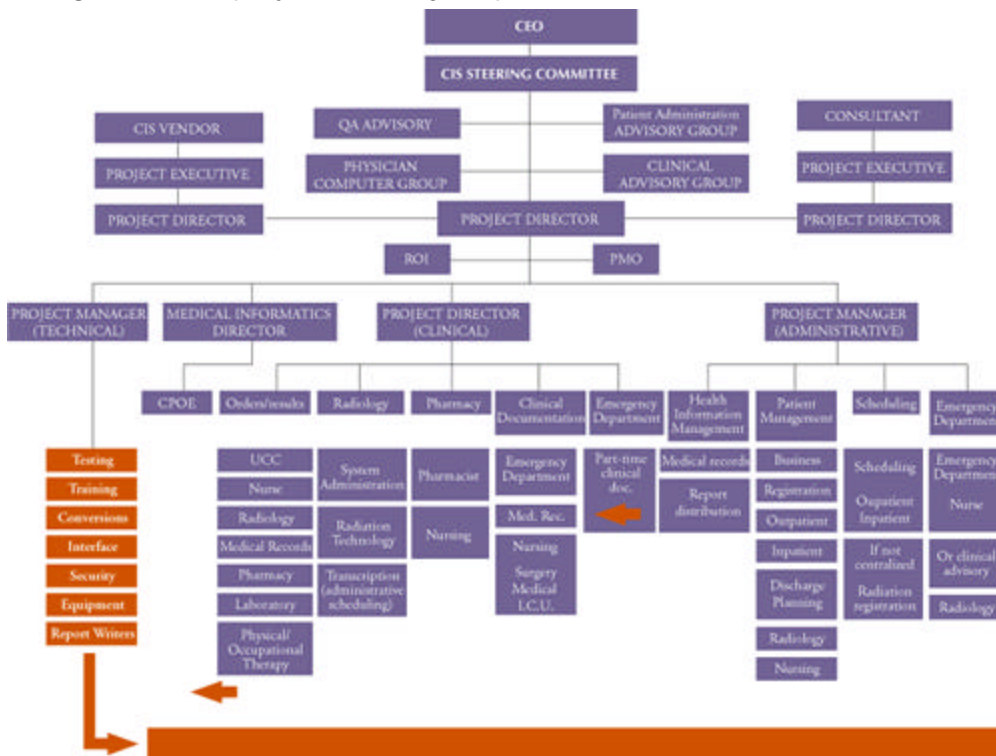


Figure 2: Example of an Effective Clinical Transformation Project Organizational Structure

The Importance of Teamwork

The partners in a clinical transformation should begin to work together as early in the engagement as possible. Working together closely will be essential to the success of the project, so the ability to collaborate productively should be an important criterion in selecting project partners. In a successful collaboration, the roles and responsibilities of each partner are well defined and clearly delineated.

All should work from a single detailed and integrated work plan. Each team is composed of individuals with the skills and authority to accomplish its objectives. Each team is accountable for meeting its objectives and timeline milestones. Watching such a team in action, an outside observer or a health system clinician usually can't tell who works for the provider, the vendor, or represents the consultant.

On a day-to-day basis, consultants and facilitators working on behalf of the consultant transfer their knowledge of project acceleration, workgroup facilitation, and methods of measuring project success to hospital team members. The provider quickly integrates this knowledge into his in-house skills and capabilities.

A Case Study of Successful Collaboration

A Midwest hospital system was the product of the merger between two previously competing hospitals. The new organization understood at the outset that rethinking and redesigning clinical processes and practices was going to be an integral part of their clinical transformation initiative. The clinical systems vendor and the consultant were brought in simultaneously at the beginning of the project. The hospital system hired Consultant to help shape a clear vision and to design the future state of the system so the clinical systems vendor could install the technology. It was clear from the outset the hospital system didn't want

technology to drive the project, but instead desired a collaborative relationship among the three project partners. Consultant's first task was to analyze the project's potential return on investment and build an objective business case justifying the project's cost. Consultant also discovered opportunities to begin receiving benefits from transformed processes before the system goes live. Consultant's Rapid Design methodologies and workshops got the project off to a fast start. The hospital system wanted a single project plan that would include all the work steps required of both the systems vendor and the consultant. Based on that integrated model, Consultant prepared a project structure that included project directors from all three partners.

Guiding the project was a steering committee of executives from the health system. Consultant played a supporting role to teams from the health system and vendor. No partner controlled the outcomes of implementation decisions. Conflicts had to be worked out among team members based on the merits of proposed solutions.

Consultant led three Rapid Design workshops, each lasting three days. The first workshop dealt with workflow and process design. In this workshop, teams totaling 240 people from the health system got a detailed introduction to the systems vendor's applications. Consultant guided the teams through incorporating leading practices into all their clinical processes, and designing them for the agreed-upon future state. Teams included vendor representatives, who participated in design discussions and advised the teams regarding whether or not the information systems could perform as desired.

Three weeks later, after extensive preparation by Consultant, the teams began building the system to support the processes that were designed in the previous session. The third workshop finalized the design of the system, how users would interact with it to perform specific functions and what reports and labels it must

generate. Consultant was accountable for the teams meeting their objectives and timelines during this design phase of the implementation. To help maintain the momentum initiated in the workshops, Consultant established a project management office (PMO), providing personnel, a comprehensive project plan, tools to track and resolve implementation issues, and methodologies to guide the project to a successful conclusion.

Consultant also established and led three clinical advisory groups that contributed to the design of a computerized physician order entry (CPOE) application. With Consultant's guidance, the physician design group, composed of IT advocates and skeptics began to build order sets. Consultant imparted the knowledge and impetus that continues to fuel this effort. The coming together of two hospitals with distinct missions and cultures and arriving at consensus among physicians in devising standardized order sets is a significant accomplishment — successful beyond the partners' expectations.

Building order sets on paper will greatly accelerate the speed with which the CPOE can be implemented once the system goes online and should dramatically hasten physician adoption of computerized order entry.

At this writing, work teams are building the health system's CIS, which is scheduled to go live in March 2004. Consultant is continuing to support the project by providing education, leadership in improving clinical processes, and objective verification of the vendor's compliance with commitments.

A health care provider will face no greater risk than transforming its core processes, and implementing advanced clinical information systems to thrive in the competitive future. Mistakes will be costly, failure potentially fatal. There will be only one opportunity to get things right: the first time. Health care organizations must depend on the products and support of clinical systems

vendors. They may seek project guidance and integration expertise from a consultant with a track record of successful implementations. They must commit their own energy and resources to the task. They must choose project partners they can trust to collaborate with each other, a partnership to which they entrust their future.