

Inside Perspective

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Change Management Strategy and Tactical Change Management

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Change: It defines the landscape of healthcare over the past 100 years, and it is the inspiration that drives technology. In 2003, MEDITECH began roll-out of their Advanced Clinical System, reinforcing their position at the forefront of improving how hospitals deliver healthcare and conduct business—and how they deal with change.

The Advanced Clinical System line-up directly addresses the commitment of many healthcare organizations to continuous quality improvement, focusing on IT patient safety improvement initiatives. The suite includes Patient Care System (PCS), Physician Care Manager (PCM), Bedside Medication Verification (BMV), Medical & Practice Management (MPM), Emergency Department Management (EDM), and Patient Discharge Instructions (PDI). The product line virtually redefines point-of-care clinical computing and completely revolutionizes the way caregivers go about their daily routines. Instead of physicians, nurses, and other hospital staff going where the information is, information will now be readily available where the caregivers are, at the patients' bedside.

MEDITECH has recently released an implementation plan that can have an HCO up and running with an improved clinical information system in three years or less. But what often gets overlooked is the impact these changes can have on the people who are going to implement and use this new system in their daily activities. We often work with organizations in similar situations to ensure a smooth transition and to make sure the organization is well prepared to take full advantage of the new capabilities.

The old adage “the more things change, the more they stay the same” has a modern day adaptation: “the more things change, the more things really change.” The decision, selection, and implementation of this new software package places an immediate initial demand on IT departments. The installment of Electronic Medical Records (EMR) and Online Medication Administration Records (OMAR) migrates institutions towards a truly paperless environment. This increases end user dependence on technology, while demanding that a fail-safe operational continuance plan is developed and instituted. Networks often need to be completely renovated to support the expansion of end user devices, increased traffic, wireless technology, and electronic file storage and access. And once all of this is done, daily maintenance needs to be factored in as well. A well-staffed and capable IT department is essential in managing the transition through guidance and support of end users before, during, and after the implementation.

The acceleration of change in the modern day workplace is poking individual tolerance levels sharply in the ribs. Hospital staff resistance to incorporating new technology into present workflows can be a significant obstacle—and managing that natural resistance to new technology starts in the early stages of strategic planning.

An excellent first step is to establish a Patient Safety Committee that has clear endorsement by the administration. The committee should include (but not be limited to) a physician representative, nursing representatives, a pharmacist representative, an IT spokesperson, and a Patient Safety Manager. The main focus of the committee should be to:

- Increase all clinicians' awareness of safety issues
- Educate staff about patient safety concepts
- Obtain and act on patient safety problems and issues throughout the organization
- Generate user buy-in to expected process changes and improvements when implementing MEDITECH's Advanced Clinical System
- Position patient safety as a best practice for senior leadership

An increased visibility of executive commitment to, and participation in, patient safety initiatives will set the example from the top down. Consider revising the hospital mission statement to accurately reflect the strategic emphasis on IT-based patient safety, and ensure that all staff members understand its importance. The goal is to cultivate an environment that is receptive to change, and to pair it with a controlled technological evolution.

Visitors, patients, and the surrounding community should also know about IT-based patient safety initiatives. Education of patients and visitors should be a high priority; it will make their stay more pleasant, and upon discharge, they will have satisfaction of knowing they were treated with the latest in healthcare technology. Involving the surrounding community in medication safety initiatives and medication self-management programs will help enhance the public understanding of the hospital's commitment to patient safety.

The larger scale technologies such as CPOE and BMV rely heavily on bar coding as identifiers. Implementing small-scale bar code reliant technologies used to verify patient identification in clinical applications such as blood administration or laboratory specimen collection builds experience and promotes buy-in throughout the facility. For organizations not currently operating with bar coded wristbands, this approach can be a quick—and relatively painless—introduction to what is to come.

Incorporating change management early on in your strategic planning lays a strong foundation for successful implementation of MEDITECH's Advanced Clinical System. JJWild has worked closely with MEDITECH as the system was developed, and we would welcome the opportunity to work with you to help achieve your patient safety IT strategic initiatives.

Kevin Masson is one of the clinical consultants on staff at JJWild. If you would like more information on how JJWild can help you prepare for and manage the changes associated with implementing MEDITECH's Advanced Clinical System, email us at editor@jjwild.com.