

DOQ-IT



Arkansas

Nancy Archer

HCQIP Director







Guess What...

• We're in a WHAT pilot??? • QUICK, do an Environmental Scan - AFMC Staff Stakeholder groups - Physician practices - Vendors – Wiring



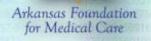




What the Scan Identified...

- <u>AFMC Staff</u>: Valuable relationships with providers and experience in office environment with QI; some with EHR exp.
- <u>Stakeholders</u>: 3 Majors interested in HIT, but have NO independent resources—
- <u>Physicians</u>: Approx.1570 physician practices---about 73% solo. Some interest in HIT, but no time, need help—ONSITE







What the Scan Identified...

 <u>Vendors:</u> Couple of local products, assault on QIO to market products—difficulty understanding QIO role

• <u>Wiring</u>: Many dial-up only areas of state—1 of least wired states in country







Physicians Need & Want:

- Someone to help that has a CLUE and time to spend in their clinic for free!
- Peers to help gain perspective--good and bad.
- Someone to assess & research to give them a few good recommendations of products.
- Money to buy the system they want
- GUIDANCE through the Process...



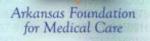




Barriers

- Lack of financial incentives
- Change is not widely accepted in the medical community
- Gaining "buy-in" consensus from every physician in a group
- Vendor market instability
- HIPAA and security concerns
- Reluctance of administration to change current Practice Management Systems







Moving on Quickly...

We must create our own model for DOQ-IT in AR:

Consultative Model

Academic Detailing





AR DOQ-IT Roadmap

Recruit Assess Plan Select Implement **Evaluate** Improve

enroll onsite/everything/team goals/redesign/improve software & hardware clinic support goals met/data capture care management



Assess, PLAN, Select...

- "PLAN" must be stressed
- Big implementation errors are often due to lack of thorough planning
- You have to know how current processes flow in the practice to be able to plan adequately for a new tool
- Educate the physician and office staff that time spent planning will payoff...





Identifying Waste

- Flow mapping: examine patient visits
 - A variety of visits
 - Observation "through the patient's eyes"
 - Details to look for:
 - Constraints/bottlenecks
 - Total cycle time and patient-provider time
 - Customer service
 - Facility barricades, equipment inadequacies
 - Paperwork
 - Waste, duplication, rework
 - Value-added and non-value added activities
 - Handoffs







Measuring Encounter Flow

- Follow two individuals from the office
- Note every step
- "First we...then we..."
- Differentiate between process steps (something happens) and queues (waits and delays)
- Measure time in minutes





Mapping Process Steps

- Draw a floor plan (or use OSHA evac map)
- Watch one person perform their work, noting where they go and what they do
- Do this for each person in the process of focus
- Map the process steps







Lessons Learned

- Workflow modification must be addressed prior to selecting and implementing an EHR product
- Planning is crucial and standardization of processes is a MUST from the standpoint of documentation compatibility and data retrieval
- Physicians are engaged and resolute in transitioning to EHRs



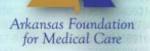




Successes

- Recruitment efforts
- Clinics are moving along the path to being fully implemented
- Acceptance of the necessity to address workflow issues prior to implementation
- We are a primary resource for the physicians of the state that are interested in EHR adoption





Participation As of 8/15/2005

of clinics participating
of physicians participating
of NPs participating
of PAs participating

clinics with EHR

of participants planning to implement EHR in next year



75



Arkansas DOQ-IT Team:

physicianoffice@afmc.org

1-877-375-5700



