



Implementing Change Leadership to Drive Meaningful Use

THE ORGANIZATION

Ochsner Health System is a nonprofit, academic, multi-specialty, healthcare delivery system dedicated to patient care, research and education. The system includes 29 hospitals owned, managed and affiliated, and more than 60 health centers located throughout southeastern Louisiana. Ochsner employs more than 2500 affiliated physicians in more than 90 medical specialties and subspecialties, and has more than 17,000 employees systemwide.

RESULTS

- 99% of physician practices utilizing the new EMR system are meeting the meaningful use standards
- In the month following the EMR rollout, more than 1,500 patients scheduled their own appointments through the EMR patient portal- today more than 300,000 Ochsner patients use MyOchsner
- Increase in patient volume of 20% across the system

Successful demonstration of meaningful use deadlines—as defined and continuing to evolve within the HITECH Act—are upon us and getting more robust. Yet many healthcare organizations are still struggling with adoption by certain constituency groups. In this day and age of disappearing margins, dwindling financial resources, and the need for safe patient care, healthcare organizations must get this one right.

In GE's work with organizations that are successfully implementing new electronic medical record (EMR) and Computer Physician Order Entry (CPOE) systems, there has been one significant mechanism for forward progress—the ability to identify and engage stakeholders as the fulcrum to success.

THE “MEANINGFUL USE” CHALLENGE

As a result of this inconsistency in the use of electronic medical records, the federal government has developed and implemented a program that financially incentivizes organizations to adopt EMR systems that effectively assist them to meet meaningful use guidelines. However, as health system leaders know, it's not as simple as purchasing an EMR system and expecting the checks from the federal government to start arriving. Hospitals and practices need to show the federal government that the system is helping doctors and hospitals reduce waste and errors to ultimately provide better and safer patient care. This will be especially critical as organizations that are still unable to demonstrate meaningful use now begin to face penalties.

For many organizations, migration to an EMR system while successfully demonstrating meaningful use will be the single largest initiative they have ever undertaken. Not only is it a systemwide implementation of a new technology, but also it impacts the daily workflow of almost everyone in the organization—from physicians and nurses to billing, reception, laboratory, and even patients—creating a daunting task for leaders at health systems across the country.



THE ORGANIZATION

Like many health systems, Ochsner had already begun using EMR, and was ahead of the curve in 2010. However, they were using dozens of different systems across their hospitals and health centers that made it difficult to facilitate the kind of information sharing and data reporting mandated by meaningful use. In order to improve and make patient care safer while also benefiting from the very first wave of incentives being offered by the federal government, and more important, to avoid facing financial penalties down the road, leadership at Ochsner decided to undertake the prodigious task of migrating the entire health system (more than 90 clinics and hospitals) to a single, fully integrated, patient-centric EMR system.

“We knew that in order to be successful, we were going to need a very high level of buy-in from all of our employees—from the CEO to the nurse on the overnight shift and receptionist in the emergency department. So we partnered with GE Healthcare Camden Group to help implement both the change management and change leadership we needed for the success of this initiative,” said Chad Jones, assistant vice president of Corporate Systems at Ochsner Health System (in 2010).

“This was going to be the largest undertaking our organization had ever faced, and it was mission critical that it be a success for both financial reasons and for improved patient care.”

Chad Jones (2010)

AVP, Corporate Systems
Ochsner Health System
Louisiana

TWO KEY INGREDIENTS: Change Management and Change Leadership

Organizations that are successful at substantial change initiatives of this nature are those that develop and implement a strategy that successfully integrates change management (the technical component) and change leadership (the cultural component) into transformation. GE Healthcare Camden Group has developed a change leadership methodology that can be successfully integrated into large transformation efforts called Change Acceleration Process (CAP).

“I have found most organizations are very effective at change management—developing the plan, budgeting, organizing, measuring, and allocating resources,” says Ruth Sens, RN, master change agent and consulting manager, GE Healthcare Camden Group. “However, change leadership, which provides a compelling need, a shared vision, and engages stakeholders at all levels of the organization in creating change that is sustained, is often overlooked or even completely absent in large transformational change initiatives. Successful organizations are able to integrate both of these elements.”

GE Healthcare Camden Group has crystalized the CAP methodology into a simple formula that describes the creation of a successful leadership culture for transformation: $Q \times A^3 = E$. To achieve this culture of change, the quality of a solution (Q) (such as an EMR in the case of Ochsner) can produce effective results (E) only to the extent there is employee alignment, acceptance, and accountability (A³).

A FORMULA FOR RESULTS

GE Healthcare Camden Group collaborates with healthcare providers worldwide to help improve culture, operational, clinical, and management processes by leveraging GE's industry-recognized tools, clinical expertise, and global best practices. The leadership team at Ochsner had a plan for how they would roll out the new EMR system, but they needed the GE team to help make it a success by integrating CAP into the implementation.

PUTTING CAP INTO MOTION

The team took a “cascading” approach to the project, first engaging Ochsner's top-level executives (asking them to co-create the implementation plan) and then moving down the chain of command, meeting with key constituent groups involved from physicians, to nurses, case managers, social workers, administrative staff, etc. Each of these meetings had common objectives:

- Share the vision: The reason to change, whether driven by threat or opportunity, is instilled within the organization and widely shared through data, demonstration, demand, or diagnosis. The need for change must exceed its resistance.
- Create a shared need: The desired outcome of change is clear, legitimate, widely understood, and shared; the vision is shaped in behavioral terms.
- Mobilize commitment: There is a strong commitment from key constituents to invest in the change, make it work, and demand and receive management attention; key constituents agree to change their own actions and behaviors to support the change.

“At Ochsner, it was important to explain to each constituency that we met with why we were rolling out this EMR system in the first place,” Sens says. “While many of the hospital executives were familiar with the government's ‘meaningful use’ requirements, many of the staff were not aware, and it was important for us to educate them both about these new requirements and the financial implications involved.”

“Amazingly, the agenda for each of these meetings was basically the same no matter who we were meeting with,” says Peggy Odem, O2 Team Change Leadership at Ochsner Health System. “And we had plenty of skeptics in each meeting, but by utilizing CAP we were able to demonstrate the vision and why this change was necessary. By the end of each meeting, almost everyone was committed to making the project a success because they felt informed and empowered.”

Ochsner did not stop with these initial meetings. With the understanding that true change could not be implemented just at the senior level, and had to be part of an ongoing conversation, they worked with GE Healthcare Camden Group to provide training sessions for staff and set up a framework for two-way communications.

“Working with GE, we realized it was important to establish an effective communications program,” explains Cade Farmer, communications specialist, Ochsner Health System. “We call it ‘O2,’ and it's not a coincidence that O2 is also the symbol for oxygen—that's exactly how we view communications for the EMR rollout here at Ochsner—it's the lifeblood of our CAP program. Through O2, we are able to remain engaged with stakeholders at all levels of our organization in a two-way discussion.”

ACHIEVING RESULTS

Ochsner initiated the EMR rollout in 2010, and by the end of 2012, 75% of the project had been successfully completed. In addition, 99% of physician practices utilizing the new EMR system are meeting the meaningful use standards. In the month following the EMR system rollout, more than 1,500 patients scheduled their own appointments through the EMR patient portal. Ochsner has quickly realized the improvement to care, safety, and efficiency as a result of this project. They've also seen another ancillary benefit—an increase in patient volume of 20% across the system.

“One of the most exciting parts of this project has been watching our employees change from skeptics to believers,” Chad Jones (2010) says. “We recently received a note from a physician who simply said, ‘I get it now.’ He explained how he no longer was wasting 30 minutes looking for a patient chart or trying to interpret someone’s handwriting. That eureka moment—when our staff realizes that we can now provide our patients with better, faster, and safer care—perfectly encapsulates the ‘human’ element needed for successful CAP implementation.”

“Implementing effective change management and change leadership is like eating your broccoli or going to the gym—you know you have to do it, but you don’t want to,” Jones says. “Working with the GE team helped keep us on track and marching toward our goal of moving our entire health system to a single EMR solution while meeting the ‘meaningful use’ standards.”