

Chapter 54

Big Information Technology Bet of a Small Community Hospital

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ABSTRACT

Broadlawns Medical Center (BMC) is a teaching acute care community hospital of 200 beds located in Des Moines, Iowa. As other safety net providers across the nation, the hospital operates in a difficult environment with a growing number of uninsured patients and simultaneously dwindling tax support. By 2005, George Washington University and several Joint Commission reports had publicly highlighted the hospital's challenges of financial sustainability and the provided quality of care. The hospital's senior management team decided to adopt an Electronic Health Record (EHR) system in an attempt to gain access to real-time performance data. The EHR adoption project posed many organizational, managerial, and technological challenges but also provided numerous eventual benefits. BMC had not only successfully resolved the stated problems of healthcare quality, financial stability, and patient satisfaction scores, but also became one of the national leaders in healthcare information technology.

BACKGROUND

The case study takes place at Broadlawns Medical Center, which is a teaching acute care community hospital in the state of Iowa. The hospital combines multiple clinics, which offer a wide spectrum of traditional and specialty services in such areas as emergency, primary care, pediatric, internal medicine, surgical, foot and ankle, and mental health. BMC was recently recognized as one of the nation's "Most Wired – Small and Rural Hospitals" by Hospitals & Health Networks magazine (Weinstock & Hoppszallern, 2011). The hospital's mission statement is based on the premise of

providing high quality healthcare regardless of the patients' ability to pay.

Broadlawns Medical Center values such strategic business priorities as continuous improvement of healthcare quality, commitment to patient satisfaction, development of motivated professionals, and advancing of nursing, dental, and medical student education (Broadlawns, 2011). The hospital has been providing health care to the residents of Polk County for over 85 years with the increasing emphasis on high quality and high value services (Stier, 2011). BMC continues to serve nearly 40,000 people with almost \$70 million in uncompensated care on a yearly basis (Stier,

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2011). Taxes, which partly support Broadlawns Medical Center, have stayed unchanged since year 2000, but the hospital has experienced a notable 15 percent increase in the number of uninsured patients in 2010 alone (Stier, 2011).

INTRODUCTION

The Joint Commission (TJC) is a not-for-profit health care quality accreditation organization based out of the United States. Many state governments recognize TJC accreditation as a prerequisite to Medicaid reimbursement. Healthcare providers participating in the TJC accreditation program are subjects to triennial accreditation cycles. TJC accreditation hinges on surveys, which are conducted impromptu 18 to 39 months apart. Hospital accreditation decisions and potential Requirements for Improvement (RFIs) are made public with the date accreditation is awarded. TJC updates the standards it uses on a yearly basis and posts them on its website. Broadlawns Medical Center surveys of 1998, 2001, and 2004 did not result in TJC delivering full three-year accreditations due to quality problems. Instead, The Joint Commission issued RFIs with tentative follow-up focus surveys meant to correct the revealed quality deficiencies.

In June 2005, George Washington University released a comprehensive study, which raised doubts about “the continued viability of Broadlawns Medical Center (Jenner, 2011).” The study highlighted such problems as the increasing numbers of uninsured patients, insufficiency of funding sources, and absence of a clear sustainable model for delivering safety net services to the uninsured patients of Polk County, Iowa (Nolan, et al., 2005). University researchers interviewed more than thirty area informants and drew secondary data from a variety of official sources. The study stated that Des Moines healthcare safety net offered few specialty services, which were highly fragmented and poorly coordinated when matched with the national statistics. The study

mentioned several failed attempts to create an electronic collaboration system, which would assist the uninsured patients in navigating the highly fragmented and increasingly complex healthcare environment. Broadlawns Medical Center learned from the report that it was considered the county’s core safety net healthcare provider. The hospital also gathered that even though the community wanted BMC to survive, taxpayers and officials were reluctant to guarantee the hospital’s future financial stability. Broadlawns needed to act quickly by raising the focus on healthcare quality, reducing fragmentation of the specialty services, strengthening partnerships with other healthcare providers, promoting the positive image of the hospital, and increasing public support.

Until recently, the hospital’s information systems solution was Siemens software suite originally implemented in 1984. By 2004, the software lacked many of the needed updates and was a significant impediment to the future operations of the medical center. The same year, BMC senior management decided that a technological transformation was necessary.

The Healthcare Information and Management Systems Society (HIMSS) is a United States (US) organization striving to improve such areas of healthcare as quality, safety, cost-effectiveness, and access via utilization of information technology and management systems (wikipedia.org, 2009). HIMSS Analytics is a HIMSS division responsible for collecting and distributing analytical data of healthcare. HIMSS Analytics admits that hospital Electronic Medical Record (EMR) systems are of variable capabilities, which in turn poses significant challenges to their comparison. HIMSS Analytics has formulated an EMR Adoption Model with seven distinct stages intended to simplify peer comparisons of hospital organizations and assist in the EMR adoption strategies (himssanalytics.org, 2011).

Some of the HIMSS Analytics Stage 6 requirements include having physician templates (documentation and charting) for at least one

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