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Obtaining buy-in for an information systems buy

Blogs, brown bag lunches, buttons, and buddies in the IT department have more in common than alliteration. They might help your efforts to obtain a new or upgraded information system for your laboratory and then communicate its benefits to hospital staff.

Think inside and outside the box when seeking buy-in for an information technology purchase, advises Judy Kirby, president of the executive health care IT recruiting firm Kirby Partners and co-author of the book *Make I.T. Known: Marketing Strategies and Case Studies in the Healthcare Environment.* "No matter what business you're in, you have to be marketing to a certain extent," she says.

The "in-the-box" aspects of garnering support for your IT purchase should be fairly obvious. Among them, put together concrete reasons for why the system is needed and how it will impact finances, efficiency, and patient safety, Kirby says. Start out by making a "best friend and a buddy in IT" who will help you make sure your purchase aligns with the hospital's overall strategy. "Especially right now with electronic medical records, integration becomes such a key piece [of the decisionmaking]," she explains.

But getting the ear of the chief information officer and others who need to sign off on a purchase can be difficult. "CIOs today are under a great deal of pressure with all the federal initiatives," says Steve Bennett, vice president of Kirby Partners and a co-author of *Make I.T. Known*. "If you can even get on the CIO's schedule, you've got your foot in the door." (See "Giving the laboratory a voice in systemwide informatics strategizing," CAP TODAY, November 2012, page 76, for tips on how to get the attention of CIOs and chief medical information officers.)

With a nod toward "out-of-the-box" approaches, Chuck Christian, chief information officer at Good Samaritan Hospital, Vincennes, Ind., and co-author, with Bennett and Kirby, of *Make I.T. Known*, says to think about your "neighbors." The laboratory should communicate its message to departments that may be affected by its purchasing proposal to garner their support. For example, if the lab is pushing for a system upgrade, it might communicate to physicians, nurses, and other hospital staff how the new system will benefit them, as well as such details as whether the lab would be shut down for any length of time and how functionality or reporting methods would change.

Target your audience's concerns, Christian says. "Use the language they understand."

"Never assume that it's a no-brainer—that everybody should just get it," he continues.

"There's always a group that I haven't considered. So I just kind of walk through it and say, 'Okay, if I was them, what would I want to know [before I support this purchase]?'"

But getting the support necessary to buy the system is only half the battle; showing staff outside the lab how the new system benefits them can be equally challenging.

When Good Samaritan purchased a new computerized physician order-entry system, the implementation team put together a communications plan and worked hand-in-hand with the marketing department, Christian explains. They held a special educational evening with physicians to demonstrate the system and address the physicians' questions and concerns and get their feedback. They branded the project and gave away buttons and stylus pens as well.

Christian and his department have also promoted IT initiatives to physicians via "lunch-and-learn" brown-bag sessions held in the physicians' lounge or a conference room near the cafeteria. "I actually stood out in the hallway

and asked the docs to come in and I'd ask them, 'So where's your pain points? What are you not able to do?' And I had several that said, 'You know, this is what really just drives me crazy,' and one of my guys said, 'Well, I can fix that for you.'"

Other communication strategies range from putting articles in the physician newsletter and announcements on the hospital's intranet to hanging up a banner announcing a system launch. Christian wrote a blog at one point to share information with staff about ongoing and new initiatives, as well as industry and regulatory news.

Laboratories can also turn to their institution's marketing or public relations department for expert help and advice. It's important for individual departments, including the lab, to promote and market themselves and the good things they are doing, and to do so on a regular basis, Bennett says.

"They need to tell the rest of the hospital what their accomplishments are, what they are doing for the overall strategy of the hospital," he continues. "When it comes around to the next year's budget time, it's much easier to allocate funds to a highly performing successful division of the hospital."

2012 Best in KLAS Awards: Siemens laboratory system a winner once again

Siemens' Novius Lab laboratory information system took top honors in the laboratory category of KLAS Enterprises' Best in KLAS Awards: Software & Services for the fifth consecutive year.

The 2012 awards are based on KLAS' annual report ranking the best-performing health care IT vendors in nearly 100 market segments as determined by ratings generated from nearly 20,000 interviews with health care providers.

"It speaks volumes that providers want to be heard and be counted," says KLAS president Adam Gale. "And vendors are listening."

The winners were, among others, Cerner, for its application hosting services and extensive IT outsourcing services, and McKesson, for its Paragon community hospital information system.

Epic was the winner in eight of 23 software categories and also earned top honors as overall software vendor, overall software suite vendor, and overall physician practice vendor.

[KLAS Enterprises](#), 800-920-4109

Apollo and ClearData team up on cloud-based offering

Apollo has entered into an agreement with ClearData Networks, under which ClearData will host Apollo's clinical multimedia management solution, Apollo EPMM, in the cloud.

With Apollo EPMM (enterprise patient media manager), all clinical media for a patient can be integrated and accessed in the electronic medical record system.

"This cloud-based model enables health care organizations of all sizes, as well as individual physicians and allied health professionals, to securely capture, manage, and access clinical multimedia content from their desktop at a low subscription fee that includes full use of the application and all necessary storage," says Mark Newburger, Apollo president and CEO.

ClearData Networks provides off-site storage of medical images in a vendor-neutral, DICOM-compliant cloud storage network.

[Apollo](#), 703-288-1474

[ClearData Networks](#), 602-635-4000

Alternative meaningful use criterion for reporting laboratory results

The federal government issued a proposed rule last month that adds an alternative stage two meaningful use criterion for the electronic transmission of structured laboratory results from hospitals to the health care providers who ordered the lab tests.

The rule, issued jointly by the Office of the National Coordinator for Health Information Technology and Centers for Medicare & Medicaid Services, states that hospitals must send structured electronic clinical laboratory results to the ordering provider for more than 20 percent of lab orders received from such providers, regardless of how the orders were received.

The original meaningful use criterion for lab orders requires hospitals to send structured electronic clinical lab results to the ordering provider for more than 20 percent of the lab orders it receives electronically.

The federal government explained in the proposed rule that it generated the alternative criterion because the original version assumes that if a hospital does not receive lab orders electronically, it will be less likely to send the results to the ordering provider electronically. The proposed rule also states that a hospital that receives a very small percentage of lab orders electronically may find it difficult to meet the original threshold regardless of the number of lab results it sends electronically to ordering providers.

Hospitals would have the option of using the original or alternative measure to satisfy meaningful use objectives.

The alternative criterion was published in the Dec. 7 Federal Register as an interim final rule with comment period.

HHS posts information on mobile device security

The federal government has introduced an online resource pertaining to how health care providers can protect and secure patient information on mobile devices, such as smartphones, laptops, and tablets.

Available on the Department of Health and Human Services Web site at www.healthit.gov/mobiledevices, the resource features training videos and tips.

"HHS listened to you," reads the Web page, titled Your Mobile Device and Health Information Privacy and Security. "HHS conducted a Mobile Device Roundtable in March 2012 and held a 30-day public comment period to identify and gather the tips and information most useful to health care providers and professionals using mobile devices in their work." However, HHS adds, the information provided is not intended to be exhaustive nor serve as legal advice.

Contracts

Lifepoint Informatics has entered into an agreement with Yankee Alliance, under which it will supply the Andover, Mass.-based group purchasing organization with connectivity software for exchanging laboratory results and reports and other patient data. Yankee Alliance, a member of Premier Inc., has more than 12,800 health care members nationwide.

Lifepoint Informatics, 201-447-9991

Yale-New Haven Hospital, New Haven, Conn., has announced plans to install Mediware Information Systems' Transtem cellular therapy software. Yale-New Haven is a nonprofit acute care hospital with two main campuses.

Mediware Information Systems, 888-633-4927

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