

Nurse Leaders Guide to a Large-Scale Information Technology Implementation

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BACKGROUND

Worldwide, the benefit of utilizing an electronic medical record (EMR) has been recognized as the way of the future in healthcare. Many countries, including Canada, Korea, the United Kingdom, and the United States, have acknowledged the need and are acting upon it.¹ Despite the benefit and safety that the electronic record provides, adoption of electronic charting and ordering has not occurred quickly, and as a result, in 2009, the American Recovery and Reinvestment Act was put in place, providing \$20 billion in funding to be applied specifically to the development of health information technology.¹ In addition to the funding provided through the American Recovery and Reinvestment Act, the Centers for

The intent of this article is to provide nursing leadership with tools that will lend to a successful information technology (IT) implementation. Through researching documented experiences regarding nurse expectations, fears, and hurdles during IT implementations, this article provides nurse leaders at all levels the information needed to attain nurse buy-in and success from the period leading up to the decision to undertake implementation through the go-live period itself.

Medicare & Medicaid Services, in collaboration with the Office of the National Coordinator for Health Information Technology, provided further incentive with the initiation of Meaningful Use.² By meeting specific objectives set in a series of phases, healthcare institutions can receive financial incentive; however, not meeting specified requirements can lead to decreased Medicare payments.²

The EMR has made dramatic improvements in the management of medications and chronic disease through increased quality of care² and patient compliance.³ Not only does the EMR provide improved quality of care through clinical excellence and financial incentives, it also heads the effort towards performance improvement by making data more readily available and searchable for research and trending information related to nursing practice and patient care,³ which are just a few of the reasons why the use of IT is predicted to exponentially increase in the future.² Implementing a large-scale IT project is an enormous effort, both in manpower and financial investment, and in the past, substantial investments have been made only to have IT implementations fail related to flawed leadership⁴ and lack of buy-in from staff.³ Nursing staff comprise the largest portion of the healthcare provider population in the United States,⁵ and because of this sheer volume, have the largest role in determining the success or failure of a large-scale information

technology implementation.² Nurse leaders, therefore, are critical to the success of implementation, both from a product standpoint and the overall success within the institution.⁶ Consequently, they need to be both informed and prepared with the information and tools that will support success for their staff, the project, and the institution as a whole.

THE ROLE OF NURSING LEADERS IN AN IT IMPLEMENTATION

Key factors have been noted that relate specifically to leadership that aid in success of IT implementations, as well as factors that have led to project failure. Forecasters of information technology project success include the availability of fiscal resources, the formation of policy, and the degree of support provided to staff.⁷ There are also known factors that have led to implementation failures, including leadership not accepting the unknown, failing to prepare for the unexpected, not recognizing work that occurs behind the scenes, and “undernourished initiatives.”^{4(p5)} Ultimately, project success is going to depend on the ability of staff and leadership to adapt to the large change in practice that will occur as a result of the implementation process. “Producing change is approximately 80% leadership—establishing direction, aligning, motivating, and inspiring people—and about 20% management—planning, budgeting, organizing and problem solving”^{4(p4)} clearly placing nurse leaders of all levels in the frontline position to lead an implementation and guide it to success.

Nurse leaders can be found at all levels of an organization. Such roles include chief operating officer, chief nursing officer, executive level directors, directors, nurse managers, charge nurses, and staff nurses who lead unit initiatives by becoming involved in hospital committees. Depending on their role, the efforts put forth and the effects of these efforts will differ. There are initiatives that will need to be addressed by all levels of nursing leadership, both individually and through collaborative efforts. First noted will be an outline of nurse leadership roles with initiatives specific to each role, which will be followed by a discussion of initiatives that will need to be addressed by all levels of nursing leadership in order to attain the goal of a successful large-scale IT implementation.

Chief Nursing Executives

Chief nursing executives are usually involved in a project from the period when there is a thought of undertaking a large-scale implementation, perhaps even before a decision is made to shop for the product. Nursing executives are going to be entwined with executive leaders from all clinical areas involved in the development of the new IT undertakings. New implementations will require baseline assessments as well as future state workflow changes and policy decisions. These changes require nurse executives to stand confidently beside physician counterparts as well as IT executives who have a longstanding experience with IT design and implementation.⁸ Chief nursing executives often are key stakeholders in deciding which product to purchase; however, they often look solely at the functionality that the systems offer. It

is important to remember as a chief nursing executive that the system chosen must not only offer the functionality needed to support organizational needs for data and workflow, but that there also be the ability for the system to further nursing research and practice in the future.⁸ Chances are, it may have been some time since chief nursing executives were involved in direct patient care, which also means that the key to truly being successful in meeting the needs of nursing staff during the implementation process requires that the frontline staff are involved in the process from the initial stages of development all the way through post go-live.^{3,9} In addition to being an advocate in advancing nursing practice and involving frontline staff in the process, it is also important that executive-level leaders go one step further to ensure that the system will meet, not only the needs of the organization, but also the expectations that staff and other key stakeholders may have as well.¹⁰

Directors

Nurses who are employed at a director level are in a unique position. Director-level nurse leaders are often a liaison between the nurse managers and executive-level leadership. Directors are often viewed as a key support person in that they are a level above the nurse managers and are often recognized by staff as members of senior leadership.¹ Throughout the implementation process, from the beginning through the go-live period, it is essential that nurse directors remain visible and are perceived as available to assist and help when needed.¹¹

Nurse Managers

Nurse managers are the most proximate members of nursing leadership to frontline nursing staff, placing them in a vital position to act as a liaison and facilitator between nursing staff and executive leadership. Not only do nursing staff and leadership view the nurse manager as a primary form of support for staff, managers are also the driving force for staff in regard to learning the system and workflow changes that will occur as a result of implementation.¹¹ The nurse manager will not only need to advocate for her staff and assure that their needs are being considered by the analyst team,^{1,12} they will also need to serve as a role model and demonstrate the importance, ease, and opportunities that the new program(s) will encompass.¹²

Charge Nurse and Staff Nurse Leaders

The nurse leaders who reside on the unit themselves, charge nurses, and those nurses who are actively involved in hospital committees are often viewed as having the greatest impact on staff as a whole.¹ Charge nurses and nurses with leadership initiative are frontline staff, they are peers. The attitude toward and acceptance of the new software by this core group of individuals will directly impact the overall success of the implementation among the staff and the organization as a whole.

Before moving into factors that will pave the way for implementation success that will require initiative from all levels of leadership, it is important to note that there are some characteristics and behaviors that are imperative for all nurse

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