

THE Value Initiative

Members in Action: Implement Operational Solutions

Northwestern Medicine – Chicago, Ill. *Using the EHR to Drive Value*

The AHA's Members in Action series highlights how hospitals and health systems are implementing new value-based strategies to improve health care affordability. This includes work to redesign the delivery system, manage risk and new payment models, improve quality and outcomes, and implement operational solutions.

Overview

To convert patient data into more actionable insights, Northwestern Medicine (NM) restructured its approach, enabling its electronic health record (EHR) to produce more value for patients, providers and the organization. Multi-disciplinary teams collaborate to maximize the EHR's capabilities and improve care across the system.

The Health System Clinical Collaboratives (HSCCs) are focused on 22 areas, such as anesthesia, nursing, radiology, behavioral health, transplant, cardiology and radiation oncology. Each team is led by physicians and includes clinicians and administrators from all 10 of the system's campuses. The teams have dedicated facilitators and staff from Informatics, IT, Analytics, Quality and Performance Improvement. This strategic approach to process improvements



Northwestern's Health System Clinical Collaboratives improved the patient experience, patient safety and the clinical experience.

Impact

The HSCCs have resulted in systemwide improvements related to the patient experience, patient safety and the clinical experience. Examples include fewer duplicate tests, streamlining and standardizing the EHR fields, and consolidating three lab catalogs and three radiology catalogs into one of each. The process has resulted in a universal consent form, online scheduling, improved hand-off tools and plans of care, and using evidence and decision support to reduce patient falls, improve mobility, and assess for delirium or sleep apnea, for example. The HSCCs include staff from other departments when appropriate, such as registration or finance, resulting in overall improved request turn-around time, with better design, better build and improved communication/ education.

paves the way for clinician buy-in and helps prioritize IT projects in a holistic manner throughout the organization.

The HSCCs are focused on optimizing the EHR to improve patient outcomes, reducing inefficiencies, implementing best practices, reducing clinical variation, incorporating innovations into clinical care and developing quality measures. Previously, NM focused on amending the EHR without broadly considering the impact of any changes, resulting in siloed progress. NM uses the Epic EHR throughout the organization.

Lessons Learned

Because they are dedicated to improving care instead of fixing the EHR, the HSCCs have resulted in more robust collaboration throughout NM, according to Thomas Moran, M.D., vice president and chief medical information executive.

“By focusing on improving care, we have the collaboratives working on EHR functionality that meets the needs of the patients and the organization, as opposed to putting in a ticket to get ‘X’ fixed,” he said. “What we ended up doing in the past was building something and then trying to sell what we built, and it didn’t work well because someone always wanted to change it.”

Moran credits the HSCCs’ success to putting clinicians at the center of the decision-making process, building in dedicated support staff and aligning with IT to keep the teams’ momentum going.

Future Goals

Plans are in place to roll out HSCCs to address additional medical and surgical specialties. NM also is considering supplementing current EHR training webinars with brief one-on-one coaching sessions to teach clinicians practical tips to free up more time to spend with patients.



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