

# Effective Electronic Patient Record Implementations

## Helping You Navigate Your EPR Journey

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February 2021



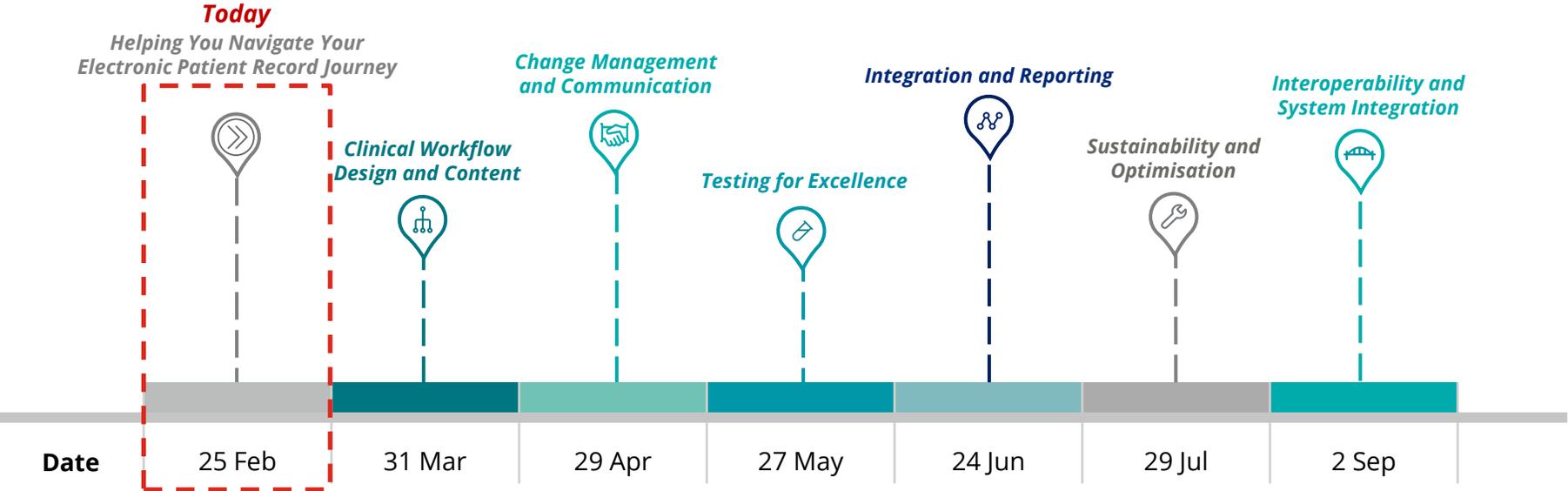
# Effective EPR Implementations: Overview of the Series, Purpose, and Schedule

The Effective EPR Implementations webinar series is a set of seven one-hour virtual sessions with Healthcare providers. This series is focused on EPR implementations and driving your success through a holistic implementation approach

## Purpose

- ✓ Focus on effective partnerships necessary to succeed in EPR implementations
- ✓ Highlight common pitfalls faced by clients and areas needing support
- ✓ Share key strategies necessary for healthcare practice transformation through EPR implementations

## Schedule



# Speaking With You Today



**Fran Cousins**  
*Partner, UK*



**Marc Perlman**  
*Global Digital CARE  
Leader, US*



**Nick Wong**  
*Managing Director, US*



**Minakshi Krishnan**  
*Managing Director, US*



**Imran Chaugule**  
*Senior Manager, US*

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Topic	Speaker	Timing
Welcome	Frances Cousins and Marc Perlman	5 mins
Effective EPR Implementations: Overview of the Series, Purpose, and Schedule	Frances Cousins	5 mins
Overview of Successful Project Startup <ul style="list-style-type: none"><li>• The Big Picture</li><li>• Setting the Foundation: Governance, Guiding Principles, and Effective Decision Leadership Support and Alignment</li><li>• Total Cost of Ownership (TCO)</li><li>• Strategies for Clinical Design, Change Management, Training, Technology, and Testing</li></ul>	Marc Perlman, Nick Wong, Minakshi Krishnan, Imran Chaugule	30 mins
Our Practice	Marc Perlman	5 mins
Q&A	Frances Cousins	15 mins

# UK EPR Landscape

The NHS Long Term Plan commits to fully digitising acute, community and mental health providers by 2024, and introducing an EPR system is an important milestone in any Trust's digital transformation journey.



## 2023

Target date for secondary NHS healthcare providers to transition to digital records



## 16-24 months

Average time it takes a hospital to implement an EPR



## 23%

Proportion of NHS Trusts confirming that the majority\* of their patient records are digitised<sup>1</sup>



## £3.7bn

Government funding confirmed for **40 digitised hospitals** in the biggest hospital building programme in a generation

“ “ The transition has required **major organisational change** and has **not been completely painless** ” ”

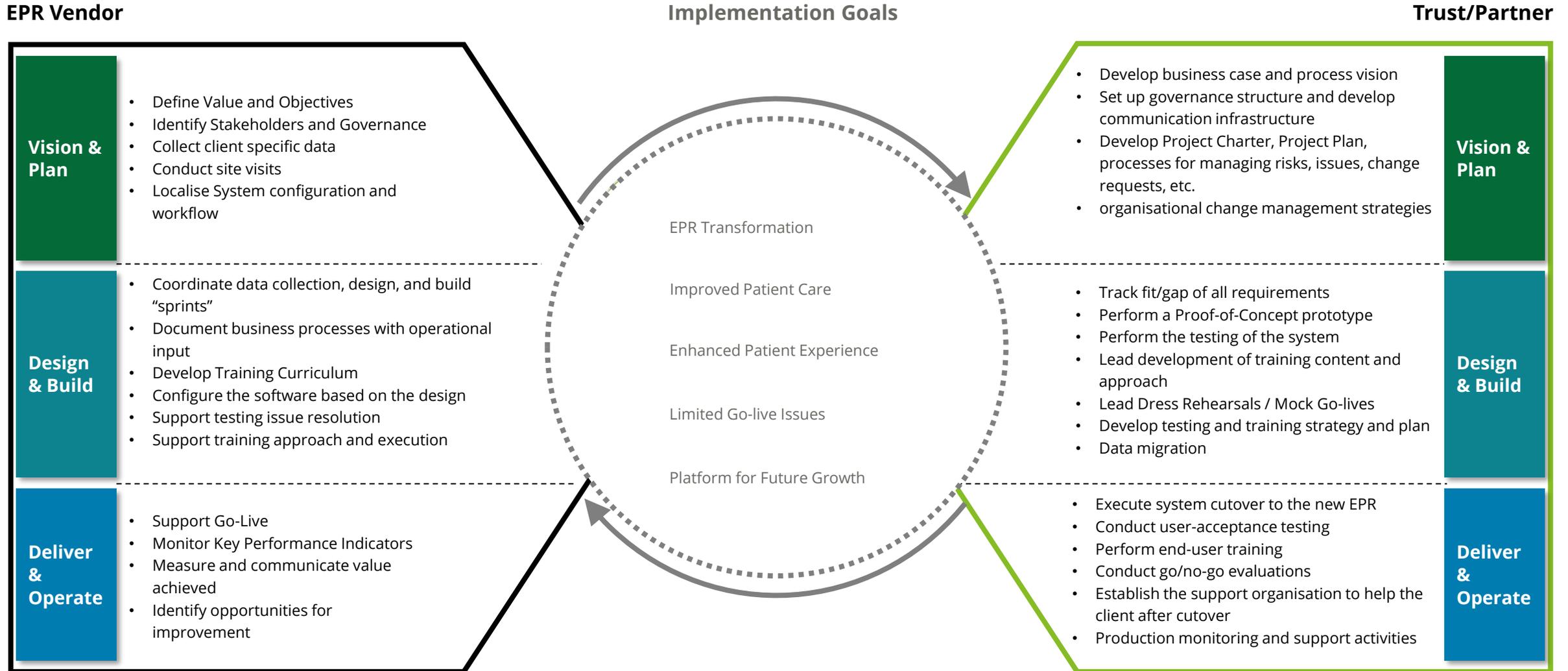
- CEO of one Trust transitioning between EPRs

\* Between 76 – 99% of patient records

# Overview of Successful Project Startup

# The Big Picture

Trusts and Partners work with major EPR vendors for implementations using leading practices



# Setting the Foundation: Governance, Guiding Principles, and Effective Decision Making

Setting a strong foundation from the beginning enhances overall outcomes and Programme success

## Governance

A well-structured governance model helps ensure decisions are made at the right level, by the right stakeholders, at the right time

## Guiding Principles

Establishing appropriate Guiding Principles sets the ground rules for system design and implementation, guides decisions, and keeps teams focused on overall goals, objectives, and the desired end state

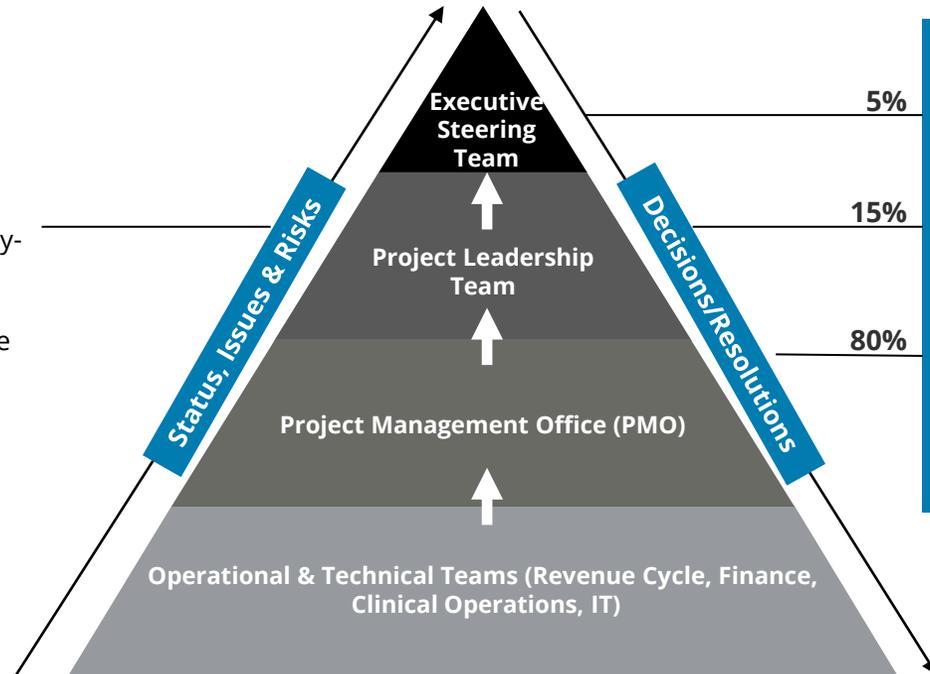
## Effective Decision Making

Decisions that could potentially impact the programme timeline, cost, quality, safety and/or future-state operating model should be escalated to programme and clinical governance



### Establish Leadership Support

Leadership support and buy-in is cultivated from the very beginning of the Programme



### Key Success Factors

- Timely decisions that are efficiently communicated
- Membership provides representation of the collective voice of the organisation
- Steering committee members are vocal change advocates

### Guiding Principles

- Proactive issue management
- Forward-looking risk management
- Leverage standard functionality
- Timely decision-making
- Adherence to project processes and procedures

## Importance of Governance, Guiding Principles and Effective Decision Making



**1** Commitment from key stakeholders



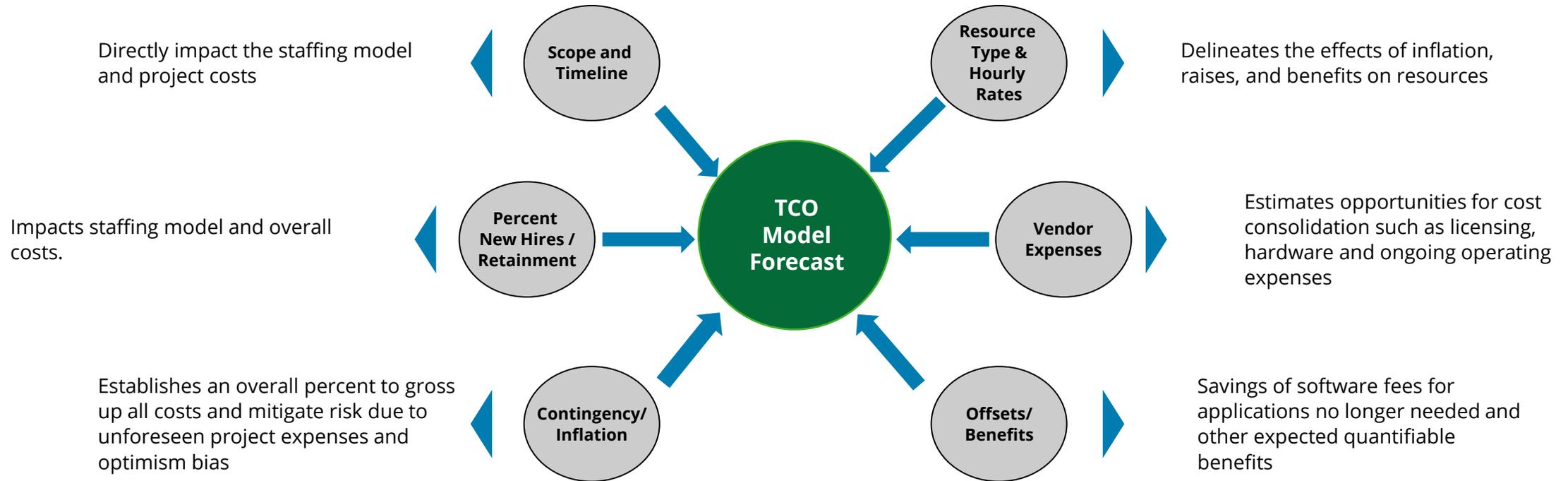
**2** Align direction



**3** Better decisions

# Total Cost of Ownership (TCO)

As a component of the overall business case, a TCO model can be built to estimate overall capital and operating expenses for leadership to make an informed decision. More mature organisations will identify both quantitative and qualitative benefits



## Importance of TCO

**1** Build a strong business case

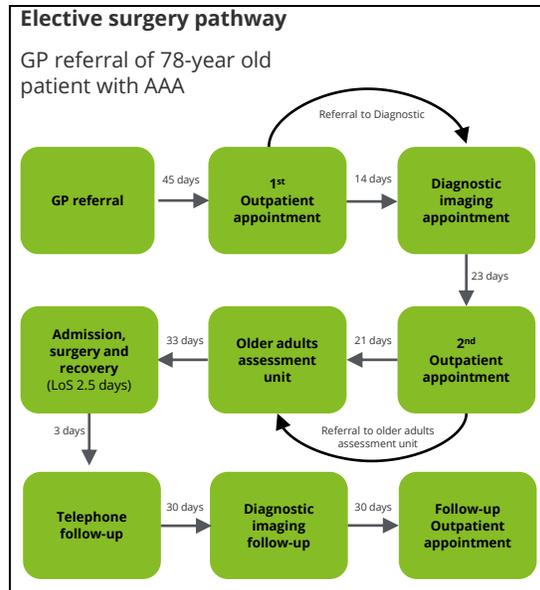
**2** Make strategic, data driven decisions

**3** Communicate capital and operational funding requirements to the Board

# Strategies for Clinical Design

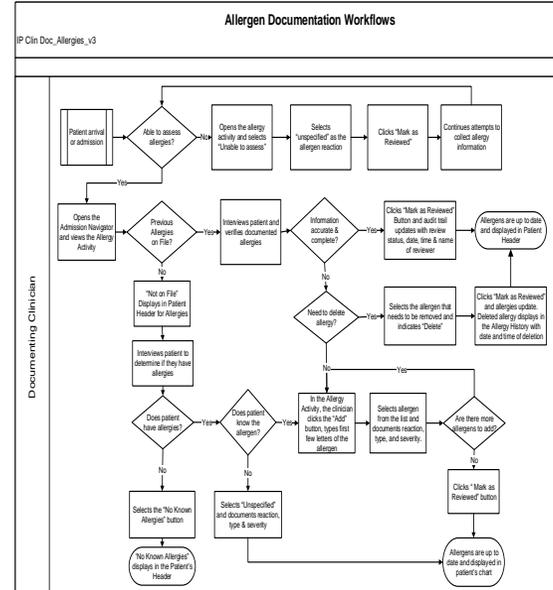
Clinical Design develops the sum of all non-patient specific knowledge integrated into the EPR to enable the delivery, documentation and reporting of patient care.

## Pathways



Optimises end to end patient pathways for specific conditions through an organisation or health system

## Workflows



Optimises individual component activities of patient pathways, defining the workflow

## Content (examples)

- ✓ Order Sets
- ✓ Clinic letters templates
- ✓ Discharge letter templates
- ✓ Results ranges
- ✓ Drug regimes
- ✓ Assessment tool (Waterlow)
- ✓ Problem lists
- ✓ Care planning tools

Provides the tools for clinicians to document care, incorporating clinical decision support and standardisation

## Importance of Clinical Design

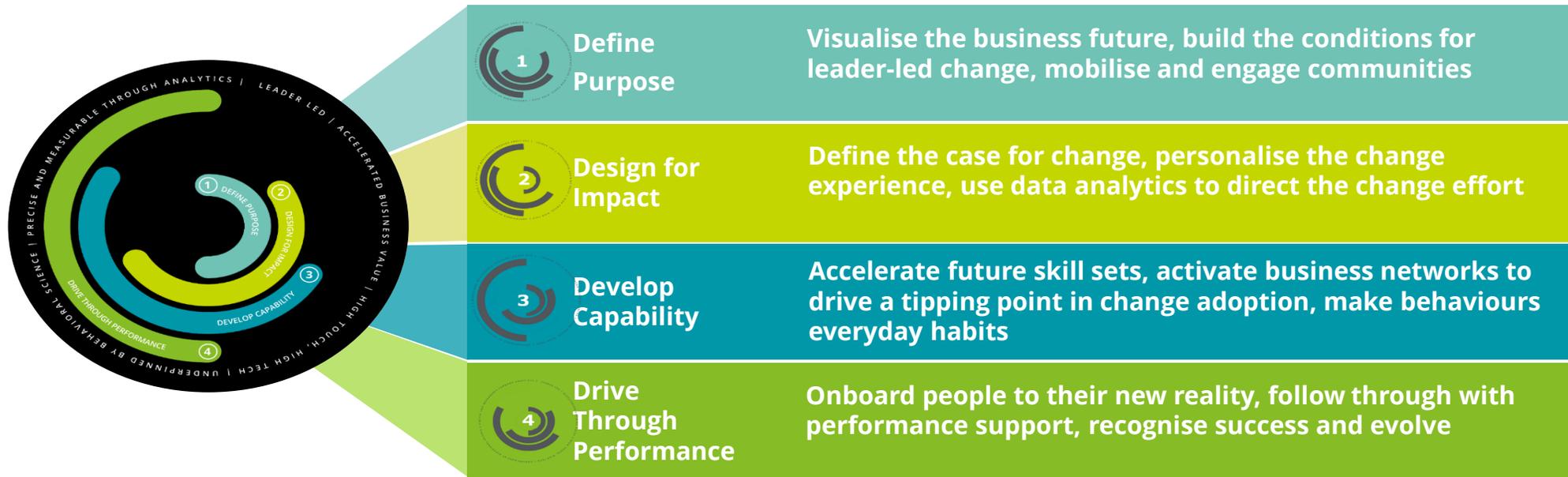
**1** Deliver high quality patient care

**2** Improve standards and consistency

**3** Build efficient clinical workflows

# Strategies for Change Management

Four Essential Elements guide your organisation's transformation



## Expected Value for Each Essential Element

Define Purpose	Design for Impact	Develop Capability	Drive Through Performance
<ul style="list-style-type: none"> <li>• Clear need for change and sense of urgency</li> <li>• Articulated benefits &amp; impacts</li> <li>• Alignment of leaders</li> <li>• Engagement with key communities</li> </ul>	<ul style="list-style-type: none"> <li>• A comprehensive change roadmap, using data</li> <li>• Identification and mitigation of key risks</li> <li>• Defined process to shape culture</li> </ul>	<ul style="list-style-type: none"> <li>• Business networks are equipped to drive the change agenda.</li> <li>• People introduced to new roles, skills and behaviours</li> <li>• Learning drives individualised ways of learning</li> </ul>	<ul style="list-style-type: none"> <li>• Everyone working in the new way</li> <li>• People feel empowered and able to adapt</li> <li>• Tools and accelerators ensure successful transformation</li> </ul>

## Importance of Change Management

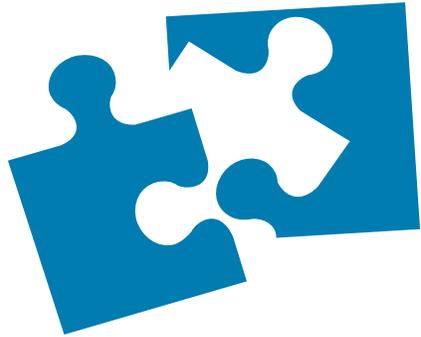
**1** Establish buy-in from key stakeholders

**2** Highlight impact of changes

**3** Drive adoption throughout the organisation

# Strategies for Training

End users will need to learn how to use the new system. Effective training will maximise the investment made in the implementation



## Vision and Objectives

*The goals and objectives of the training strategy to guide activities throughout the project*

## What We Know

*Understanding end user needs, desires, and lessons learnt from other training efforts*

## Team Structure

*High level outline of team structure, roles, and responsibilities*

## Content Development

*Approach to designing curricula, lesson plans, delivery method, curriculum build, review process, materials, etc.*

## Credentialing Approach

*Approach to recruit, hire, onboard and credential contract trainers to deliver end user training*

## Training Logistics

*Approach to scheduling, registration and reporting on end user classroom training*

## Deployment & Delivery

*Leverage hub-based and instructor-led approach with support from Super Users and At-The-Elbow resources*

## Importance of Training Strategy



**Enhance user comfort in new system**



**Effectively coordinate content development, trainers, and trainees**



**Enable end users to 'hit the ground running'**

# Strategies for Technology

Implementing a modern EPR solution requires an understanding of the underlying technologies to define a strategy addressing several key areas.

<b>Infrastructure and IT Assets</b>	The architecture, hardware, software, and environment hosting supporting the organisations IT vision and strategy.
<b>Devices (Biomedical &amp; End User)</b>	Biomedical and end-user device procurement, installation, and maintenance in addition to peripheral devices to support the EPR implementation.
<b>Security</b>	The application security strategy involves the plan to design, develop, implement, and test security controls for deployed applications.
<b>Interoperability (Interfaces/APIs/MDIs)</b>	The exchange of data from EPR to/from ancillary systems, vendors, devices, downstream systems, etc. and between hospitals/clinics MDI bridges the data gap between bedside medical devices and EPRs.
<b>Historical Data Conversion</b>	The pre-loading of patient data (e.g., allergies, problems, notes, etc.) from legacy and paper sources to new EPR.
<b>Change Control/Release Management</b>	The setup, maintenance and management of data across EPR environments e.g., Development, Test, Production, Training.
<b>BI and Reporting</b>	The use of EPR data for operational/analytical reporting and to support development of business intelligence and data warehousing.
<b>Downtime Planning</b>	The preparations required to ensure the operational and technical readiness in case of EPR down time.



Core Technology enables a **Digital Future**



- Patient engagement
- Communication & coordination
- Data-led care
- Operational efficiency & productivity
- Emerging technologies

## Importance of Technology Strategy



**Provide core technical infrastructure and functionality**



**Enable integration between core and third-party systems**



**Assist in a smooth transition of data from legacy systems**

# Strategies for Testing

A critical aspect of any EPR Implementation is the adequate testing of the new system to ensure that it will perform as expected and meet defined quality standards

## Testing Approach and Scope

## Types of Testing



### Approach and Methodology

- Are there organisational testing practices, standards and tools that can be leveraged and/or adapted for the EPR implementation?
- What is the EPR vendor's testing approach and how does it differ from our best practices?
- How do we determine what needs to be tested?
- What are the acceptable conditions to move from one testing phase to the next?



### Scope/Timeline

- What is the functional footprint of the EPR implementation? What legacy systems and how many will be replaced?
- What is the scope of testing? Does it include Volume, Stress Testing?
- Based on the overall project timeline, when can testing begin? How will testing be phased? How many cycles of testing will be adequate for each phase?



### Staffing and Resources

- How is the Testing Team structured? How many resources are required to staff?
- What is the testing team responsible for (e.g., test execution, coordination, both)?
- What skills, experience, and/or expertise is needed for testing roles?
- What roles do SMEs, end-users and other stakeholders take in the testing process?

### Functional Validations

Application Testing  
Interfaces Testing  
Integration Testing  
Parallel Revenue Cycle Testing  
User Acceptance Testing  
API and Web Services Testing  
Regression Testing

### Volume Validations

Mapped Record Testing  
Conversion Testing  
Access/Scheduling Testing  
Clinical Focused Testing  
Claims testing

## Importance of Testing Strategy



Reduce overall implementation risk



Surface issues and risks early for effective resolution



Improves adoption with User Acceptance Testing

# Case Study

# Case Study | Convergence at Large US Midwest Healthcare System

Our client sought to replace 274 disparate legacy systems with one centralised system, with more than 60,000 end users experiencing changes to their daily roles. This left leadership at all sites looking for a solution to promote success across multiple dimensions, from patient safety to revenue stability, through a capable and self-assured workforce. The resulting implementation marks the first time in the organisation's history they were able to truly operate as an enterprise from both an IT and clinical perspective.

## Results

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- Established governance framework to engage stakeholders across four regions
- Consolidated 274 disparate legacy systems
- Collaborated with application teams comprised primarily of contractors and a client team with more than 500 resources
- Executed four successful go-lives over five years
- Converged and standardised clinical and revenue cycle practice, policy, and process
- Returned to operating baseline within a week of medical center go-live

## Lessons Learnt

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- Drive convergence from bottom up and top down
- Departments and specialties that invested time in readiness activities were significantly better prepared for go-live
- Ensure any customisation aligns with transformation goals and assess potential impacts on scope, resources, timeline, and maintenance

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Are physicians ready to embrace digital technologies now?

**Q&A**





Join us for our next webinar...

# Clinical Workflow Design and Content

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Wednesday 31<sup>st</sup> March

4:00 – 5:00 pm BST



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