

Breakout on Technology: Architecture, Applications, Standards, and Security

What are the right choices for... Connecting the Doc's?

Comments by Mark Leavitt, MD, PhD
Medical Directory / Director of Ambulatory Care – HIMSS

Presented at: Connecting Communities for Better Health
Washington, DC – June 24, 2004

HEALTH INITIATIVE

HEALTH INITIATIVE

Some "Pearls of Wisdom"

also known as...

"Random Pronouncements by a
Grizzled Healthcare IT Battle Veteran,
Unsupported by Scientific Evidence"

HEALTH INITIATIVE

HEALTH INITIATIVE

What's the Best Architecture?

- It fits the way you work now, but makes you more comfortable and efficient
 - ☛ Don't radically change current data ownership model
 - ☛ Leave data within the existing "zones of trust"
 - ☛ Don't try to transform the health system ecology yet
- Solve the clinician's current problems
 - ☛ "Where the *&#\$ is the lab report?"
 - ☛ "Tell me again all the medicines your mom is on?"
 - ☛ "Copy and send this chart along with my referral"
 - ☛ "What happened while you were in the hospital?"

HEALTH INITIATIVE

HEALTH INITIATIVE

Which Applications? Incremental vs Comprehensive

- Answer: Yes, both!
- A spectrum of IT readiness – a spectrum of applications
 - ☛ **Low-impact lookups** for cautious clinicians – a web view of chart data gathered from multiple sources
 - ☛ **Focused workflow improvements** to address painful bottlenecks – like ePrescribing
 - ☛ **The real thing** for the true believer – comprehensive EHR with decision support and as much connectivity as you can create

HEALTH INITIATIVE

HEALTH INITIATIVE

Which Incremental Applications?

- Selection criteria:
 - ☛ Highest ROI – for the financially motivated
 - ☛ Fastest results – to create/maintain momentum
 - ☛ Lowest impact – for the hassled or timid
 - ☛ Most educational – for the confused
- Dead-ends to avoid
 - ☛ Significant investment that's lost when you move forward – e.g. an elaborate document scanning system
 - ☛ Training that has to be undone – e.g., moving doctors from handwriting to dictation – take them straight to EHR!
 - ☛ Data that isn't accessible/convertible to a more comprehensive system
 - ☛ Connectivity that's proprietary and isolated

HEALTH INITIATIVE

HEALTH INITIATIVE

Which Standards?

- Current standards may be imperfect, but they're way better than handwriting, paper, postage, and keypunchers
- The vocabulary standards have been declared
- The messaging standards are relatively mature
- The functionality standards are emerging
- The interoperability standards are next – you can help drive them

HEALTH INITIATIVE

HEALTH INITIATIVE