

# Southeast Texas Health Information Exchange (SETHIE)

Community Introduction and Organizational Meeting

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# Welcome

## ▶ Area Hospitals

- Tyler Memorial
- Woodville
- Winnie
- Renaissance Port Arthur
- Southeast Texas Regional Medical Center
- Christus St. Elizabeth
- Christus St. Mary's
- Baptist Beaumont
- Baptist Orange

# Welcome

- ▶ Medical and Surgical Practices
- ▶ Nursing Homes
- ▶ Home Health Agencies
- ▶ IPAs
- ▶ Hospices
- ▶ Pharmacies

# Information

- ▶ Please complete and return the questionnaire which has been handed to you. Your e-mail address will NOT be shared and will only be used for communication about the Health Information Exchange.

# Keys to Success

- ▶ Remember, the Exchange can ONLY be successful if we all participate and that participation must be:
  - Collaborative effort
  - Owned by the community
  - Controlled by the participants
  - Profiting no one, except our patients and the healthcare community as a whole
  - Represents the interaction of a mature healthcare system

# Keys to Success

- ▶ To impact the future of health care, we are going to have to think differently. This will involve “**Medical *metanoia***,” a term introduced to the business community by Peter Senge at MIT. It means, “a change of mind.” This change will involve at least three major “shifts in our thinking”.

# Shifts in Thinking

- ▶ Those who are naturally competitors are going to have to work collaboratively.
- ▶ Those who are naturally idealists are going to have to produce work which is practical.
- ▶ Those who are naturally resistant to new ideas are going to have to become innovative and receptive to change.

# 1. Collaboration

- ▶ The reality is that whatever role we play in healthcare and whatever type of organization we represent, we are all part of a larger, community, healthcare team, which often consists of those we would call our “competitors.”



# Collaboration

- ▶ Dynamic and constructive interaction of all members of this healthcare team is critical to future of healthcare, and it is particularly critical in the deployment of a successful Health Information Exchange.

# Collaboration

- ▶ By “taking charge” of our own healthcare future, we can dictate what it will look like and how it will operate.
- ▶ The only way we “lose control,” is by refusing to participate.

# Collaboration

- ▶ In this “new world,” our focus must no longer only be on “winning,” because the reality is, if “he wins,” “if “she wins,” and if “they win;” “we all win.”
- ▶ This does not mean that we cease to compete, but it means that we now collaborate at some level with our competitors to make both of us better.

# Collaboration

- ▶ Recreationally, Americans are drawn to zero-sum games -- football, basketball, car races, horse races, track and field, soccer – – in which there is a clear and decisive winner, by however narrow a margin, and where there is a clear and decisive loser, no matter how excellent a performance they turned in.

# Collaboration

- ▶ In our "health care information" race:
  - all finishers will be winners and
  - because they drive the process, all participants will be winners, if they pursue the right goal.
- ▶ All active and collaborative participants in the Health Information Exchange will be winners. The only way to lose is not to participate.

## 2. Produce Practical Work

- ▶ With the Health Information Exchange, we begin to focus on work which is very practical and which is very important to our patients, which work is:
  - Increasing the quality of care
  - Increasing patient safety
  - Increasing continuity of care
  - Decreasing the cost of care which we delivery every day

# Produce Practical Work

- ▶ One enterprising full-page ad in the *New York Times* heralded that ***“it is not how many good ideas you have that matters, but how many good ideas you can implement.”***

# Produce Practical Work

- ▶ This addresses the difference between a forward thinker and a day dreamer: “The juxtaposition of vision (what we want) and a clear picture of current reality (where we are) generates...‘creative tension’: a force to bring (vision and reality) together...” (Senge)



# Produce Practical Work

- ▶ The motivation for the HIE is a **vision** for having all relevant and valid patient information available where and when the patient's healthcare requires it. The **reality** is that today, that is rarely possible.
- ▶ The question is do we in Southeast Texas have the collective energy to sustain the 'creative tension' to change our future reality into our vision?

# Produce Practical Work

- ▶ Senge identifies “**personal mastery**” as, “...learning how to generate and sustain creative tension in our lives.” But, “Creative tension” can only produce results when it finds a place from which to leverage change.
- ▶ The HIE gives all Southeast Texas healthcare providers, of whatever description and type, the leverage point to turn our vision of the future of healthcare into our reality.

# Produce Practical Work

- ▶ Caution:

- There is one way for a vision to turn into cynicism which is when “someone...make(s) the mistake of converting...ideals into expectations.”

# Produce Practical Work

- ▶ We become cynical when we expect others to provide our future for us. No matter how hard the process is, it will be personally fulfilling:
  - If we participate in and
  - If we support the effort, with the determination to make sure it works
  - **If we accept the reality that we are responsible for our own future**

# Produce Practical Work

- ▶ It is not enough to want things to change; we have to make things change. And, as IBM learned, when they encouraged “change agents” within their organization, **“if you are going to make a change; the change better make a difference.”**

# Produce Practical Work

- ▶ If the Southeast Texas Health Information Exchange is to succeed, we will all have to take ownership of the whole as well as our part. No one can pull us, kicking and screaming, into the future envisioned by the HIE.
- ▶ We either collaborate, each bringing his/her own “creative tension to bear” on the project, or we fail.

# 3. Embrace Change

- ▶ Those who are naturally resistant to new ideas are going to have to become innovative and receptive to change.
  - Change is suspect because it upsets the equilibrium. In order to succeed, we must all surrender some level of comfort and some level of control.
  - The innovation required to design a future which meets everyone's needs is a future fraught with discomfort, difficulties and uncertainty.

# Be Receptive to Change

- ▶ Change is the very nature of healthcare.
- ▶ It is our hope to make it possible for most to experience the benefit of the change promised by the HIE before they have to bear the full weight of the effort required to make that change.



# Be Receptive to Change

- ▶ What is really needed, at this point, is for key participants to assume leadership roles in the Health Information Exchange in order to bear some of the economic, energy and effort of the change.

# Why are we here?

- ▶ No one wants to, and in reality no one can, dictate that we have to change. Events can overtake us and force us to change, but today we have the opportunity voluntarily to make a change that will make a difference in our patients' lives and care.

# Why are we here?

- ▶ What we propose will be hard; it will be expensive. We are working hard to minimize that expense.
- ▶ Until everyone recognizes the value of the change which is proposed, and then the expense, which as an aggregate will be significant, will for the individual organizations and/or provider, will be insignificant, and will be seen as a bargain.

# Mission Statement

- ▶ To promote continuity of healthcare and patient safety for Southeast Texas residents, through making patient health information accessible in a HIPAA-compliant, secure environment.

# Purpose

- ▶ To facilitate the electronic exchange of patient-centered information, between all physicians, nurse practitioners, physician assistants, hospitals, emergency departments, rehabilitation centers, home health agencies, nursing homes, ambulatory care facilities, LTACs, hospices and any other organizations which meet the Federal Government definition of a “healthcare organization.” This not-for-profit organization is both self-funding and community-driven and exists to improve the cost, quality and access to healthcare by all Southeast Texans.

# Where do we go from here?

- ▶ It is our hope that all of you will join this effort. I am confident that our community will benefit and that Southeast Texas' healthcare leadership is capable of succeeding in this effort.

# The Future

- ▶ Welcome to the future; welcome to the Southeast Texas Health Information Exchange.