Clinical engagement the key, says visiting US expert

Dr Robert Murphy, Associate Professor at the University of Texas’s Health Science Center, addressed members of eHealth NSW’s Clinical Portfolio team on how to bring about change and deliver value through a digital hospital.

Dr Murphy is an international expert on the subject, given his high-level experience as Chief Medical Informatics Officer at two major US health systems including the Memorial Hermann Health System in Texas and Norton Healthcare.

eHealth NSW Chief Clinical Information Officer Dr John Lambert caught up with Dr Murphy to get his unique take on the critical importance of clinical engagement and how eHealth is “transformative and disruptive – and here to stay”.

JL: It’s been great to have you here, Bob. In your opinion, what is eHealth NSW doing right?

RM: One of the main differences I observed since my previous visit in 2012 was the increased amount of clinician involvement, and that is a critical aspect of success. I sensed that the clinicians are starting to see that they need to be involved in the early planning and design, and prepare for the ongoing aspects of monitoring and continuous optimisation.

JL: What areas do we need to focus on?

RM: Another insight I sensed from the many meetings was the need to continue to invest in the underlying architecture to ensure fast and reliable technical performance. Many of these technologies are advancing quickly and this will need sustained investment to keep current with clinician’s needs and expectations.

JL: What’s the best way to engage clinicians, in your opinion?

RM: Clinicians need two primary things to get and stay engaged: First, simply the time to be involved, to be educated and to be prepared to be constructive members of the leadership structures. Second, with the time to get educated and aware and make constructive contributions, they need to be empowered with decision-making authority and the responsibility that comes with that. This is very different than just having meetings, showing up and offering criticisms and complaints. To paraphrase a former US President, Lyndon B. Johnson: “Any old mule can kick down a barn door. But I have never seen one pick up a hammer!” We need the clinicians to pick up some hammers, not just kick down the barn doors.

JL: What’s the best way to ensure clinicians stay engaged?

RM: If you get clinicians engaged from the start and their leadership and contributions and welcomed, I think they will stay engaged. Once my Board delegated the authority to govern EHR content, I was able to recruit and retain leading physicians for this effort. Health IT is not a one-time implementation and you are done. It is the new way of doing clinical care.

It is transformative, and disruptive. And the frontline clinicians need to be available to be deeply involved at all phases and all levels.

JL: How did you convince clinicians with their hearts set on Best of Breed solutions to use the Integrated eMR?

RM: These decisions should not be an “us vs. them” scenario. The conversation starts with what is best for the patient. But one must acknowledge that best-of-breed solutions are typically developed as more customised solutions for that specific segment. There is often the feeling that these clinicians must give up better functionality, and that is difficult to accept. Each decision has consequences for the individual users but also for the patient. Regardless of the final decisions, workflows must always ensure safe patient care during times of transitions. It is often in these open, honest conversations between clinicians on both sides of these applications in which a shared approach can be achieved.