Critical Access Hospital Goal Setting

Provided By:
The National Learning Consortium (NLC)
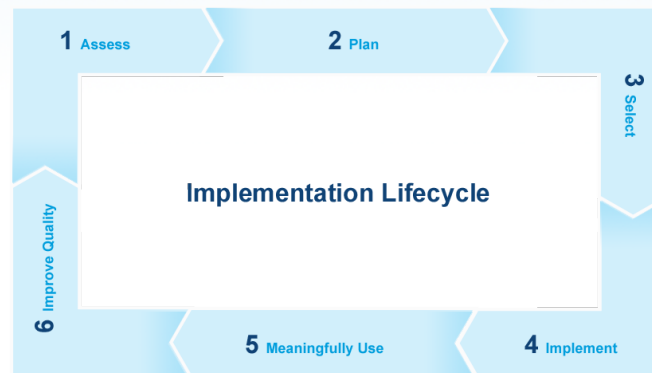
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Advancing America's Health Care

National Learning Consortium

- The National Learning Consortium (NLC) is a virtual and evolving body of knowledge and resources designed to support healthcare providers and health IT professionals working towards the implementation, adoption and meaningful use of certified EHR systems.

- The NLC represents the collective EHR implementation experiences and knowledge gained directly from the field of ONC's outreach programs (REC, Beacon, State HIE) and through the Health Information Technology Research Center (HITRC) Communities of Practice (CoPs).

- The following resource can be used in support of the EHR Implementation Lifecycle. It is recommended by "boots-on-the-ground" professionals for use by others who have made the commitment to implement or upgrade to certified EHR systems.

EHR Implementation Lifecycle

1 Assess   2 Plan   3 Select

Implementation Lifecycle

6 Improve Quality   5 Meaningfully Use   4 Implement

The material in this document was developed by Regional Extension Center staff in the performance of technical support and EHR implementation. The information in this document is not intended to serve as legal advice nor should it substitute for legal counsel. Users are encouraged to seek additional detailed technical guidance to supplement the information contained within. The REC staff developed these materials based on the technology and law that were in place at the time this document was developed. Therefore, advances in technology and/or changes to the law subsequent to that date may not have been incorporated into this material.

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Description & Instructions

- The Critical Access Hospital Goal Setting guide is intended to aid providers and health IT implementers with Planning, Selecting, Implementing, and Achieving Meaningful Use. It can be used to determine what goals are, how they should be set, and how they should be measured.

- This resource includes goal setting tools and tips.

Goals

- Goals play an important part of many of the aspects of planning, selecting, implementing, and realizing benefits of HIT
- Help educate about what is possible with an EHR
- Initiate change management by recognizing need for improvement
- Aid implementation planning, customization, testing and planning
- Establish expectations for successful adoption and optimal use
- Support benchmarking and interoperating across continuum of care

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SMART Goals

- Specific
- Measurable
- Attainable
- Realistic
- Timely & Tangible

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Specific

- Who
- What
- Where
- When
- Why

Goals not only need to be **Significant** enough to make the investment in achieving the goal but **Stretching** for the organization to push itself to continuously strive for improvement.

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Measurable

- How much
- How many

"If you can't measure it, you can't **Manage** it"

To be measurable, goals must contain specific **Metrics**, be **Meaningful**, and **Motivational**.

Attainable & Agreed Upon

- Consensus on **Acceptable** goals and commitment to **Achieving** the goals is critical.

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Realistic, Relevant, Reasonable, Rewarding, and Result-oriented

- Goals must reflect:
    - Availability of resources, knowledge and time

    Set the bar high enough to be meaningful in light of the investment made to **Reach** the results.

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Timely & Tangible/Track-able

- Short term

- Long term

If a goal is achieved within the timeframe established, celebrate it. If not accomplished, carry out an analysis of why it has not been achieved.

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Example

- Goal for a transcription scenario: Utilize structured data collection templates to reduce transcription expense by 30% within three months, 60% within six months, and 85% within one year of adopting EHR, and support clinical decision alerts and reminders

SMART Goal Setting Tool

Goal Elements	Sample Scenario	Example
Specific	Reduce provider transcription expense	
Measurable	By 30% / by 60% / by 85%	
Achievable	Using structured data collection templates	
Realistic	With one-on-one end user support	
Time-based	within 3 months/ within 6 months / within 1 year	

Current Processes

Current Processes	EHR Benefits	Metrics
1. Appointment scheduling, diagnostic studies scheduling, insurance verification, chart prep.	-Reduce /eliminate filing - Collect co-pays - Institute financial counseling	# FTE pulling/filing charts # FTE prepping charts # A/R days $ in collections
2. Patient check in		
3. Patient intake and documentation of vitals, history, etc	- Improve patient care - Match skills to task - Patient satisfaction	# missed entries # processes repeated % satisfaction on survey
4. Review results (incl. images), other encounter data, other provider & patient-supplied data	- Patient safety - Complete documentation - Reduce repeat visits/tests	Quality indicators Improved contracting $ profit in managed care
5. Clinical documentation of history and physical exam, encounter notes	- Improve patient care - Reduce time and effort to enter history data - Reduce transcription expense - Complete documentation	Quality indicators $ in transcription expense Provider productivity
6. Medication management, including samples, renewals/ mail order pharmacies		

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Key Clinic Processes

Key Clinic Processes	General Benefits	Baseline Metrics	S.M.A.R.T. Goals
1. Pre-visit	Reduce patient wait time	75% of patients wait > 15 min. for staff to find missing lab work	Reduce wait time to less than 10 min. for 100% of patients by having lab results automatically delivered to EHR
2. Check-in			
3. Patient intake			
4. Medication reconciliation			
5. Prevention screening			
6. Physician chart review			
7. H&P documentation			
8. Assess & plan documentation			
9. Staff tasking			

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