TECHNOLOGY, INFORMATICS, AND VALUE: A PERSON-CENTERED APPROACH

HINT: THE TECHNOLOGY IS THE EASY PART
AGENDA

• Who am I and why am I talking to you?
• Technology
• Relationships
• Value
WHAT DO I KNOW?

IT'S A GOOD QUESTION. ;)

I’VE AT LEAST BEEN TRAINED IN A FEW THINGS

- Technology: 15 years pre-nursing
- Nursing: 12 years (2008 BSN, 2013 PhD)
- Leadership: 3-yr RWJF Executive Nurse Fellowship
- Health IT: 8 years full-time work in EHR implementations
- Policy: 2 years at Office of the National Coordinator for Health IT (HHS)
- But seriously…the most important thing??
  - I read the room pretty well and I’m a “people person” who has no fear of talking to crowds.
- So with that in mind…let’s talk about informatics!
IMPLEMENTATION JOURNEY

Policy
Locals/Facility/ System policies

Workflows
Review pre-implementation workflows
Focus on improved efficiency
Mirror interdisciplinary best practices
LEAN/SixSigma/etc

Informatics Structure
Well-trained clinical informatics staff
Interdisciplinary informatics team
Collaborate with training, Superusers, and field support

Culture
Leadership commitment
Health IT Perspective

Training
Ongoing and iterative feedback between trainers, educators, informatics staff
Superusers
Right format and timeline: At-The-Booth, Online, In Class, etc.

Documentation
Provides value
Regulatory requirement
Operational Data Requirement
Outcomes measurement
Evidence-based Standardized data elements

Analytics
Analytics Strategy for real-time and historical reporting
Data governance
Care team representation
Focus on validity/reliability

Infrastructure
Governance
Downtime management

Teamwork
Interdisciplinary Care Team
Patient and Family/Caregiver
WHERE DO WE STAND - GENERALLY?

• 2008-2019
  • Lots of focus on EHR implementation (Acute/AMB) and interoperability with those, plus schools, home health, long-term care, etc.
  • Lots of talk about informatics, informaticists, finding our place from GoLive prep to the land of optimization and practice transformation.
  • Decreasing documentation burden, putting data in the hands of our patients, learning to design technology that supports the ethical, competent clinician*.

• 2020
  • Oy! Life has changed on every front, for staff, informaticists, and especially patients.
WHERE DO WE STAND – RIGHT NOW?

• Can’t come to the office? TELEHEALTH
• Can’t have bedside visitors? VIDEO OF ALL KINDS + TABLETS
• Running low on PPE? IP VIDEO FOR CHATS, ASSESSMENTS
• Running low on staff? REMOTE MONITORING of DEVICES and PATIENTS
• Running low on beds? MAKE A CLINIC OR ICU IN THE PARKING LOT.
• The old patient portal? OPENS A WHOLE NEW WORLD
Telehealth = 21% of total visits.

0.01% pre-COVID-19.

CMS/OCR changed sooooooo many rules around telehealth – will they change them back?

What does this mean for Informatics?
SOOO.....WHERE DO WE GO FROM HERE?

• I know this will surprise you – but nursing doesn’t always embrace radical change! But if we are going to keep any of this 2020 *stuff* we have to help our folks learn how to use and adapt it.

• How can Informaticists identify new gaps and assist in smoothing these new transitions for patients AND caregivers?

• If our operations partners don’t see technology as inseparable from practice and education...we have some work to do.
RELATIONSHIPS

...BECAUSE THE TECH IS THE EASY PART....
INFORMATICS IS A CORE COMPETENCY OF PRACTICE...AND IT’S GETTING A BOOST!

[Image of medical equipment]

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[Image of data quality report]

[Image of healthcare data]

[Image of digital patient chart]

[Image of healthcare technology]
Domain 8: Informatics and Healthcare Technologies

Descriptor: Information and communication technologies and informatics processes are used in the provision of care, to drive decision making, and to support professionals as they expand knowledge and wisdom for practice. Informatics processes and technologies are used to manage and improve the delivery of safe, high-quality, and efficient healthcare services in accordance with best practice and following professional and regulatory standards.

Contextual Statement: Healthcare professionals interact with patients, families, communities, and populations in technology rich environments. All nurses, as essential members of the healthcare team, use information and communication technologies and informatics tools in their direct and indirect care roles. The technologies, the locations in which they are used, the users interacting with the technology, and the work being done while using them all impact the data collected, information formed, decisions made, and the knowledge generated. Additionally, bringing in information and communication technologies into settings of care changes how people, processes, and policies interact. Using these tools in the provision of care results in short- and long-term consequences to the quality of the care, the efficiency of communications, and the connections between team members, patients, and consumers. It is essential that nurses at all levels understand their role and the value of their input in health information technology analysis, planning, implementation, and evaluation. With the increasing prevalence of patient focused health information technologies, all nurses have a responsibility to advocate for access and assist patients and consumers to optimally use these tools to engage in care, improve health, and manage health conditions.

Competencies:
8.1 Describe information and communication technology tools used in the care of patients, communities, and populations.
8.2 Use information and communication technology to gather data, create information, and generate knowledge.
8.3 Use information and communication technologies and informatics processes to deliver safe nursing care to diverse populations in a variety of settings.
8.4 Use information and communication technology to support chronicling of care and communication among providers, patients, and all system levels.
8.5 Use information and communication technologies in accordance with ethical, legal, professional and regulatory standards and workplace policies in the delivery of care.
MY POINT?

• Informatics has been a core competency of nursing for a long time...
  • ...but many nurses in charge of PRACTICE don’t quite know how to integrate the two.

• Think about your current role:
  • Is technology education celebrated and hardwired?
  • Is the acquisition of tech knowledge (and the use of data to drive care) part of position descriptions? The clinical ladder?
  • Can we think about the world before COVID and imagine “going back” to some of those things?
  • Do we understand how bedside care team members (in all areas) will assist patients with using this technology??

• So what do we do?
TRANSFORMATIONAL LEADERSHIP (BURNS, 1978; BASS, 1985)

- Leaders exist at all levels — they are also formal and informal.
- Authentic leadership is important:
  - Self-aware (“know thyself”)
  - Relational Transparency (“be genuine”)
  - Balanced Processing (“be fair-minded”)
  - Internalized Moral Perspective (“do the right thing”)
- Create an inspiring vision of the future.
- Motivate people to buy into and deliver the vision.
- Manage delivery of the vision.

https://www.mindtools.com/pages/article/transformational-leadership.htm
WHAT CAN YOU DO, TO ADVANCE TECHNOLOGY?

• Build ever-stronger, trust-based relationships with your people.
  • Understand basic concepts of personality, emotional intelligence, communication preferences.

• Make sure you *see* the silos, then break them down.
  • Across nurses in various settings.
  • Across the care team, all disciplines.
  • Across the "care team" barrier to all the other supporting members of the team.

• How do you do that?
SOME THINGS YOU CAN DO

• Learn about the way other people work.
  • What I’ve used: TrueColors® and MBTI®
    • TrueColorsAssessment
    • Myers Briggs
  • Or just use Google ”personality in the workplace” and you’ll find tons of information.
  • Talk to your co-workers about what you learn. Do an article review and talk about differences.
SELF IMAGE of the FOUR COLORS

**Primary ORANGE**
Energetic, spontaneous, and charming. If you’re an Orange, you tend to be action-oriented and are comfortable taking risks. You probably also tend to be competitive and seek out adventures with opportunities to push the boundaries. Living in the moment and enjoying an adaptable time schedule are important to you.

**Primary GOLD**
Punctual, organized, and precise. “Golds” tend to need structure and organization. If you’re a Gold, then order, rules, respect, and dependability are important to you. Time is a key part of your life if you’re a Gold personality type. You need to be on time and want others to be punctual as well. Following the plan or schedule it best for you.

**Primary GREEN**
Analytical, intuitive, and visionary. These are traits of the Green Personality type. “Greens” find innovative thinking and problem solving exciting. If you’re a Green, you tend to be able to see the big picture and able to effectively analyze situations. Thinking outside the box is a real strength. You also have an extreme need to be right.

**Primary BLUE**
Empathetic, compassionate, and cooperative. “Blues” tend to be very social people. If you’re a Blue, you value relationships and harmony. Genuine kindness, sincerity, and compassion are important to you. You enjoy opportunities to work with others and collaborate and any opportunity to develop a connection.
ANOTHER SUPER IMPORTANT THING

• Find a champion! Any champion, even the ones who don’t seem obvious.
  • Having trouble? Email Rebecca and she will help.
  • [Seriously. Email me. I’m a True Colors orange. ;) ]
VALUE
WAIT, WHAT DOES VALUE HAVE TO DO WITH ANYTHING?

• What is the value proposition of Nursing Informatics?
  • The job is hard to define and the value proposition isn’t always easy.
  • Even with the same PD, it is realized in wildly different ways at various organizations.
  • We are paid quite a bit of money – what are the tangible returns?

• COVID-19 seems to have widened the gap…some NI teams are indispensable while others were furloughed.

• How do you make a business case for yourself?
WAIT, WHAT DOES VALUE HAVE TO DO WITH ANYTHING – PART 2?

• I love it when people say, “Do you miss nursing?”

• The *value* of nursing informatics isn’t just about the job description but about technological knowledge and, more important, the RELATIONSHIPS you cultivate.

• Our nurses need help to learn to better use technology in the 2020 version of health IT – not only for themselves, but so that they can educate their patients in the use of that technology, too.

• We may have new work to do!! Anything that makes you a little fired up – is a great first project to tackle!!
QUESTIONS??  DISCUSSION??

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