These are certainly unprecedented times for Healthcare IT. Irony and paradox seem to dominate the horizon for CIO’s trying to navigate today’s rough seas. Capital continues to tighten while demand for information technology ironically continues to grow. The paradox is that physician adoption of IT lags, while early adopters would never go back to paper. Here at Evergreen Healthcare, our response to these challenges can be summarized into the following watch words:

• Focus on the basics
• Integrate
• Prepare for the future

Evergreen Healthcare is a medium-sized integrated system centered on a 227 bed public hospital in Kirkland, Washington. Primary care is supported through seven clinics and two urgent care centers. Evergreen Neurosciences Institute provides care for Multiple Sclerosis, Parkinson’s and stroke patients. In addition, Evergreen has an extensive home health and hospice practice.

In 2002, Evergreen Healthcare purchased the full Cerner suite of clinical applications and has implemented scheduling, registration, ADT, lab, pharmacy, order management, emergency room, surgery scheduling, surgery nursing documentation, medical records and document imaging. Nursing documentation is partially implemented and physicians have ubiquitous access to the system via a physician portal. Physicians still document and order on paper. Primary care and Home Health are fully electronic using McKesson products.

As we moved into 2009, the executive team made a conscious decision to evaluate all activities because of the continued economic deterioration. The goal was to preserve capital reserves and to avoid layoffs. For IT, that evaluation included not only the IT leadership team but also the IT steering committee that oversees all IT expenditures for Evergreen. This process generated the following results.

**Focus on the Basics**

1. **Provide a stable and responsive environment.** We consciously slowed the rate of change in the existing systems, creating fewer problems and overall increased stability. We also redoubled efforts at the help desk to ensure the phones were answered timely and that problems were solved on the first call. Our performance through the first quarter is a 5% abandon rate and an 80% first call resolution.

2. **Reduce the overall cost of operations.** We focused on travel and training initially. We also spent a lot of time evaluating our telecommunications budget, finding and cancelling data circuits, cell phones and pagers no longer being used. A consultant audited our phone bills, finding significant savings as well. Our next step is to go to major vendors and have a discussion regarding maintenance costs.

3. **Don’t start new projects without evaluating capital availability.** We started 2009 with a capital budget of $1.6 million and a number of projects al-
ready started. The IT steering committee evaluated each project already started and those budgeted for 2009. While no active projects were cancelled, a commitment was made not to start any new projects without first evaluating the capital position of the hospital. These decisions were communicated to the key stakeholders.

4. Focus on maintenance and enhancement tasks with a quick return. We have been in an aggressive project mode over the last three years, with some maintenance and enhancements being deferred. With resources not going to projects, they were refocused to the deferred maintenance activities with the highest returns.

Integrate

1. Complete migration of system phones to VOIP. The hospital had recently completed a migration from a Centranet phone system to VOIP. The clinics and remote sites were the remaining locations still on Centranet. By completing their integration into the hospital VOIP system, we will save over $300,000 per year, as well as improve the diversity of the network of the hospital by having a second entry point to the main campus.

2. Improve access of information across the continuum of care. While Evergreen Healthcare has invested significantly in IT across hospital, clinic and home care settings, the data is not readily shared. With resources focused less on specific solutions, we are renewing our emphasis on having necessary clinical data from across the system available at the point of care. This includes additional interfaces and email notification of clinical events.

3. Provide a safe place for physicians to share clinical data. Using our physician portal, Microsoft exchange® and ZixMail®, we are providing a forum for community physicians to have encrypted email conversations.

Prepare for the Future

1. Plan for Computerized Physician Order Entry (CPOE). Evergreen Healthcare has not implemented CPOE. We are taking advantage of this capital slow down to prepare for CPOE as soon as capital resources are available. Physician committees have been formed, identifying key physician leaders. Pre-requisite activities are being outlined and teed up for execution. Budget planning is well under way.

2. Prepare for sponsoring community physician Electronic Medical Records (EMR). Evergreen Healthcare has begun developing business plans for how to best help physicians in our community to implement EMRs. This includes picking a limited set of EMR offerings, identifying implementation and integration requirements and determining funding limits and expectations.

It is easy to be disturbed by the realities of capital shortages or pressures to reduce cost. The CIO’s role is to identify how to best adjust to these realities and deliver the maximum value for the resources entrusted to them.