

“Business Pull vs. Techno Push”

Leadership Challenges - Maximising value
from ICT

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Agenda

- **Who should drive and lead ICT investment?**
- **How to achieve this**
- **The overriding theme - Obtaining Value**

Who should drive and lead?

- **Business Pull**
 - Clear business leadership of ICT and information projects working closely with ICT community
 - In health care context, see business as equating with
 - *the health system's service delivery, incorporating clinicians across all medical, dental, nursing disciplines, para- medical, therapists, social workers etc. etc. in Primary, Secondary and Tertiary care facilities*
 - *the health system's resource supply and management, incorporating materials/procurement, H.R., finance etc.*
- **Techno Push**
 - Technology/ICT leadership of ICT and information projects working closely with business/service staff

Business Pull -1

- **Business leads → ICT responds with innovation and technology solutions**
- **Whole system review / change can be undertaken when business fully committed**
- **Appropriate attention is paid to People and Process as well as Technology**
- **Business focuses on the key business change drivers eg.**
 - Maximising effectiveness and outcomes incl. quality & safety
 - Achieving end to end process efficiency
 - Reducing cost or maximising revenue
- **Change leadership and management by the business**
 - Reduced resistance to technology introduction
 - ICT not 'forced in'
 - Technology de-mystified

Business Pull -2

- **ICT not about the technology - it's about achieving business/customer value**
- **Issues 'live' on desk of CEO/senior business manager → faster decision-making in respect of change projects**
- **Correct focus as business issues comprise 70 - 80 % of cost of large projects**
- **As business closer, better able to see value → improved willingness to invest**
- **Improvements not always involving ICT**
- **Creates continuous questioning and improving culture**
- **ICT seen as 'means to an end'**

Technology Push

- **ICT leads - Business responds**
- **Insufficient business leadership and ownership**
 - You can lead a horse to water - but can't make it drink (unless it really wants to)
- **Incorrect focus**
 - Change overly based on what ICT can do
 - Technology issues only comprise 15 - 25% of total project cost
 - People and Process issues not always dealt with at appropriate level
 - ICT tells business how/what to change
- **Need for change not owned by the business → Higher resistance to change**
- **Business does not see the value → Lacks business investment**
- **Any problem seen as an ICT problem**

How to achieve Business Pull

Clear Business Vision and Strategy

driving

ICT Vision and Strategy

demonstrating

Value of ICT to the business

creating

Demand for coordinated ICT- enabling

that is led by

The Business

working closely with

The ICT service delivery organisation

to prioritise

Investment in ICT

to produce

The intended value to the organisation and its customers

Getting the most out of ICT = A question of Business Leadership

- **By identifying the value that can be achieved from use of ICT**
- **By looking at the business need first**
 - ICON (Midland Health Board) an excellent example
 - *end- to end- process review*
 - *Change in process even without ICT*
 - *ICT to support new process that will already be owned by the care professionals*
 - Procurement Strategy
 - *€400 million savings possible from €40 million investment*
 - *Much of early savings possible even before ICT made available*
- **By ensuring significant business involvement on Project Boards**
- **By making ICT delivery more responsive - use of customer service approaches**
- **By separating business analysis and service development from ICT infrastructure management and operation**
- **By focussing on change leadership/management skills in business units e.g. OHM work**
- **By shifting responsibility for change from ICT function to the business units**

The overriding theme - Obtaining Value

- **Multiple Value perspectives**
 - significant potential as enabler of modernisation & reform
 - ICT must be Useful and Used to support the business
 - not just cost reduction, although obviously very important
- **Providing that value by supporting people**
 - the public
 - service recipients
 - service providers
 - *employees*
 - *partners in care*
 - *managers*
 - *researchers*
 - *policy makers*
 - *controllers*

Key value challenges -1

- **Healthcare complexity**
 - It is generally acknowledged to be very complex
 - The operational detail supported by ICT shows an even greater degree of complexity
 - Some view Healthcare as a prime instance of chaos theory in action
- **There are many stakeholders and occupational groups**
 - Getting agreement on what constitutes value is often excruciatingly difficult
 - Difficulty of each group in seeing overall value - many individuals might see problems but not see the overall value
 - Can be very difficult to capture different stakeholder perspectives
 - *often irreconcilable*
 - *may need significant negotiation*
 - Sustainment of commitment can be problematic as other issues impinge



Key value challenges -2

- **Executive support**
 - Often very freely given so that there is a lot of it
 - But not always well coordinated
 - Many champions supporting in different ways
 - Many different views on value
- **Translating executive support into executive leadership a big challenge**
 - Translating into action on the ground can be problematic
 - Competing priorities
 - Day to day firefighting
 - Stop/start investment strategies



Examples of the Value Prize Care Delivery

Up to 98,000 people die in U.S. hospitals every year through errors

- **ICT can support:**
 - person-centric integrated health care delivery system
 - efficient movement of necessary data to clinicians
 - *recording of relevant information in electronic patient records*
 - *consistent and shared views of integrated clinical data to inform care delivery*
 - *reliable and timely evidence-based decision-making*
 - *avoidance of multiple transcriptions and information gathering*
 - multi-media decision support systems - an assistant not a straitjacket
 - *significant reductions in adverse medication events*
 - *knowledge to the point of care*
 - *implementation of best practice*
 - *better outcomes and less risk to patients and staff*
 - high speed connections between service providers
 - *access for GPs via IT to diagnostic services and patient appointments*
 - *direct access systems between consultants and GPs for bookings*
 - *telemedicine and remote monitoring*
 - labour-saving devices such as voice recognition for dictation
 - facilitation of audit, CME and implementation of protocols



Examples of the Value Prize Managing Service Delivery

Irish health system spends €10 billion p.a. - not enough

- **ICT can support:**
 - higher quality, safer service delivery
 - more effective planning, decision-making performance evaluation and monitoring
 - process and transaction efficiencies and greater access to reliable data
 - improved back office operations with lower transaction cost
 - regular, timely and accurate financial information and reporting
 - more effective resource management, budgetary control and improved financial transparency
 - matching of resources to activity levels through relevant / up-t-o-date information
 - devolution of budgetary accountability to clinical managers
 - systems and processes which allow users to focus on service delivery;
 - increased focus on value for money and greater transparency in resource use



The overall prize Key Value/Benefits

eHealth = an ICT enabled, modern, user centred health system

For People as service recipients

- *a single, integrated, person focussed health system that is:*
 - *'world- class'*
 - *safe & high quality*
 - *responsive*
 - *affordable*

For People as service providers

- *modern, appropriate process, knowledge & decision supports that are always available at the point of care to maximise quality, safety, efficiency, effectiveness & economy*

For People in Government

- *manageability*
- *predictability*
- *high value for money*
- *customer satisfaction*

For People as managers

- *availability & use of high quality information*
- *enhanced monitoring & decision making*



What has HeBE done to progress the ICT agenda?

- **Developed an approach to achieving value through strategic ICT framework, aligned with health strategy and NHIS**
 - Focused on the service needs rather than the bits and bytes
 - All Health Boards and many agencies under their remit worked together
 - Focused on Information and ICT as 'must-have' for survival and growth of services directly to the person, not an 'optional extra'
- **Coordinated ICT investment and targeted enterprise projects - enabled support for best practice**
- **Placed a CEO lead on all large ICT projects to ensure business ownership**
- **Secured extra funding for ICT projects that can make a material difference**
- **Forged close links with established research centres to learn from their experiences - e.g.. TCD business school**
- **Developed interconnected and coordinated approaches to service developments and the ICT enabling of them**
- **Implemented programme/project management techniques to all work**



Main points of the draft strategic framework

- **Supporting 4 Strategic Goals**
 - Enabling integrated, person- centred service delivery
 - Increasing effectiveness, efficiency & economy of operation
 - Supporting system- wide business intelligence
 - Supporting eGovernment and eEurope
- **Progressing via 3 ICT applications domains**
 - Care delivery support
 - Extending E.R.P. support through SAP
 - Developing a business intelligence capability
- **Building upon**
 - A secure, confidential ICT Infrastructure
 - ICT policies & standards

What needs to be done?

- **Investment**
 - Obtain increased investment - move from 1% of health budget to 5% -6%
 - Use modern approaches to financing and budgeting e.g.. multi- annual budgets, PPP etc.
 - Use better investment appraisal, benefits realisation, & risk management techniques
- **People**
 - Facilitate rather than obstruct people
 - Those who provide care
 - Those who receive care
 - Develop appropriate formal approaches to change & expectation management
 - Facilitate the capture of knowledge and experience of health system staff
- **Governance**
 - Develop appropriate governance structures
 - Facilitate national leadership and direction, coupled with local ownership, implementation and accountability
 - Ensure business ownership for ICT developments

What needs to be done- 2?

- **ICT Operations**
 - Deliver ICT through use of a shared ICT service
 - Use appropriate levels of selective outsourcing & strategic supplier relationships to complement internal ICT staff
 - Operate within a nationally co-ordinated, policy-driven environment
 - Phase ICT programmes through a coherent suite of manageable, inter-linked projects
- **Technology**
 - Develop enterprise architecture
 - Develop and maintain technology strategy
 - Develop standardised desktop and infrastructure services
 - Develop interoperability framework
 - Develop technology migration strategy

Thank You