

An Insider's Look Into
Clinical Engagement





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We're Not the Same

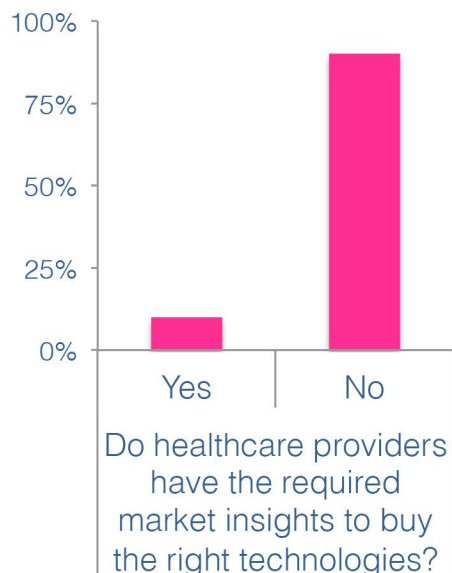
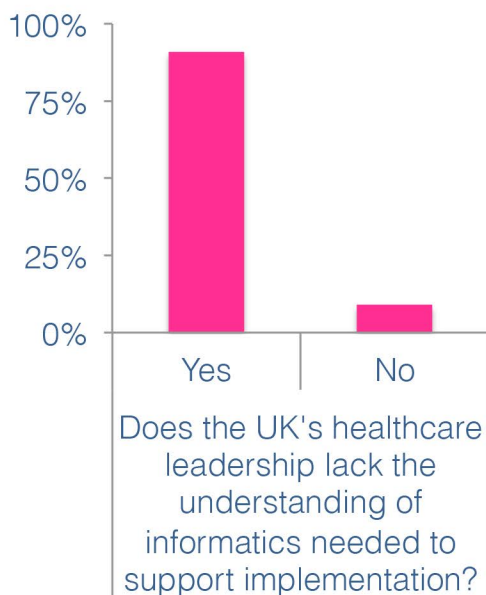
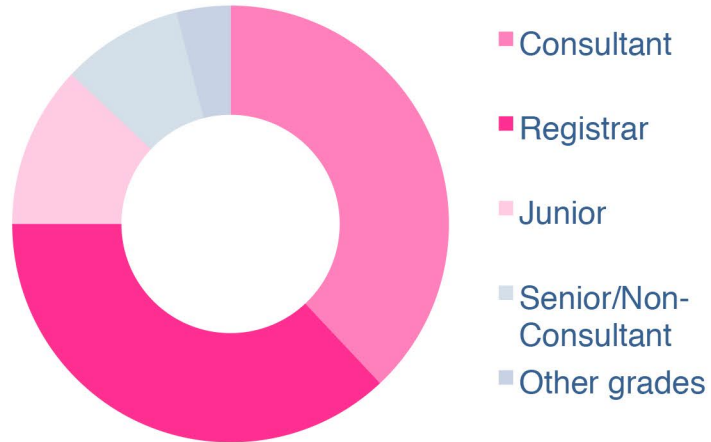
Much has been written and said about the need to involve clinicians in the technology process. Increasing efforts are being made to understand doctors, nurses and other healthcare professionals and what their working lives are like on a day-to-day basis. This is admirable, but lends itself to the belief that talking to one doctor will be enough to understand the full picture. The reality is that we come in all different shapes and sizes.

If you look at grades, you will see huge differences. For example, the work of a junior nurse will be predominantly front-line, ward-based and with a huge patient-facing component. A senior nurse, however, may spend less time in the ward and more in operational meetings or even running their own clinic. The working day of each of these people will be markedly different, and yet they will both be 'nurses' in the grand scheme of things.

Homogenising different specialties will lead to an incomplete appreciation of a healthcare system. If you look at the day of a radiologist, a general surgeon and an emergency clinician, you will see three entirely dissimilar working patterns, environments and processes. Each of these specialists will respond very differently to new innovations and technologies and their workflows may be impacted in ways you simply have not predicted.

The facts

The mix of doctors by grade in England today



109,249

The number of full-time hospital doctors working in England

60

The number of CCIOs appointed in the UK today

£1 bn

The value of matched funding being invested in the NHS over the next decade

Our Own Language

Doctors spend years developing a clinical language that's almost indecipherable for anyone looking from the outside in:

“Patient previously brought in SOB now readmitted with CP. ABG's been done, waiting for F1 to come back with partial pressures and lactate. FBCs, U+Es, LFTs have been sent. Awaiting cross match and d-dimer requested. Liaising with radiology and med reg on-call.”

Or another example:

“Our QIPP initiatives need greater management and our agreed CQUIN targets seem ambitious. Are we complying with the Outcomes Framework and are we on top of our never events?”

Engaging clinicians constantly require a conscious effort for others to communicate on their level, while also understanding their objectives and priorities. Whether you develop that capability internally or appoint a clinician within your team, it simply has to be done. And even more so today, doctors are also pursuing management roles in the hospital setting so they're diversifying their language even more to cover regulation, policy and reimbursement too.

Think Workflow

Technology will never undergo adoption and diffusion if it makes the working lives of healthcare professionals more difficult. The sheer number of tasks, interactions and events occurring on an average day requires technology to be intuitive, time-saving and user friendly.

“It’s common for 3-4 doctors to be in charge of 300-400 patients over a weekend...”

Take the example of a doctor on call in a busy teaching hospital on the weekend. It’s common for three to four doctors to be in charge of 300-400 patients over a weekend, with more than 50 daily tasks (checking blood results, reviewing patients, ordering scans, etc.). Add at least 100 hospital pages in an average shift, and then you begin to see how much work needs to be completed by each doctor each day.

If a healthcare vendor intends to add to that workload in any way (for example, the time required to use a new product or data generation that needs to be reviewed), then your technology will never be used by the majority of healthcare professionals. Walking the walk of your target market and asking the right questions at the right time will make the process smoother.

How Do We Work With Others?

Understanding how clinicians manage their individual workflow is one thing, but in reality, care delivery is multi-disciplinary, especially for chronic patients. If you plan on building a business case that engages clinicians, you should have a broader understanding of their daily interactions.

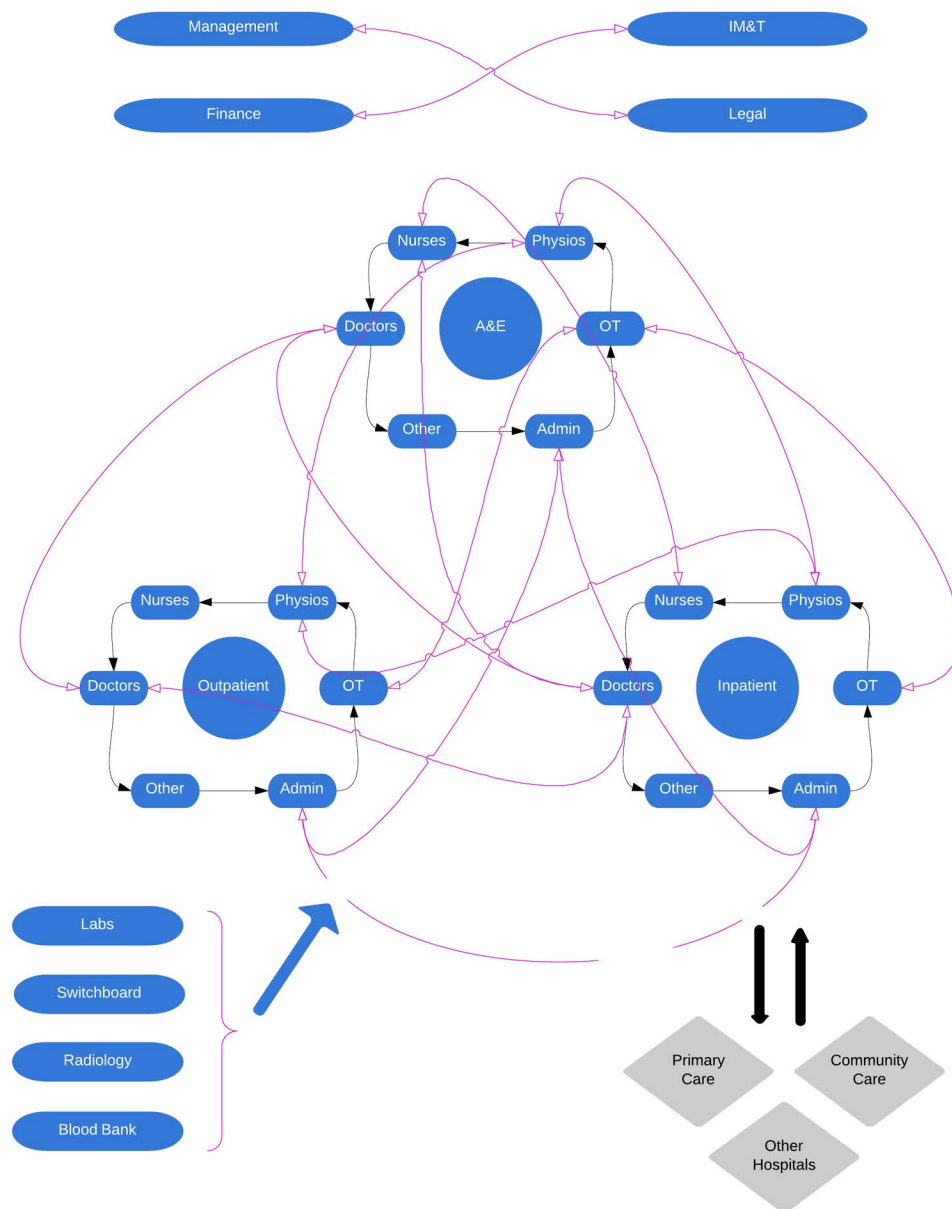


Figure 1 – An example of multidisciplinary workflow

Think Macro

Whether it's HIPAA Compliance and Meaningful Use in the US or Health and Social Care Reform in the UK, one thing is clear – healthcare is changing.

Have you stopped to ask yourself what this actually means for clinicians practically? How they practice medicine, interact with patients, manage their workloads or how they get reimbursed? In the UK, clinicians are increasingly taking up management and CCIO roles, which places them in the heart of management decision-making.

Have you stopped to consider the different stages of technology adoption that your different markets are at? For example, in the UK, EHR adoption is still in its infancy stage with most clinicians still struggling with mountains of paperwork. Their challenges are clear, but money has been set aside by the British Government to specifically address them.

In order to successfully engage clinicians, make it your responsibility to ensure that you understand the practical day-to-day challenges that clinicians face and also the macro challenges that impact their service delivery. Supporting the transition through these new reforms will be a significant market differentiator.

Understand Our Culture

It's important for an organization looking to get into healthcare, to come to the realization that your products and services are not the first innovations that healthcare professionals have seen and they won't be the last. Healthcare workers are endlessly inundated with requests to view or use new technologies, drugs and devices.

Their default setting quickly becomes scepticism, cynicism and disenchantment.

So when a genuinely innovative or useful solution arrives, it may be lost due to what is often termed 'innovation fatigue'.

What this means is that you need to make a conscious and sustained effort to educate yourself about clinicians and their ecosystems as part of your 'pre-sales' process. Through this you can develop personal understandings and relationships with the very professionals who will be not only your end users, but also driving the technology adoption and procurement processes.

The matrix on the next page summarizes the issues vendors commonly face according to two key metrics:

- User Engagement

The ability to engage clinicians at every stage from pre-sales to on-going product support with continuous feedback

- Clinical Satisfaction

The ability to act on clinicians' feedback to augment and improve products and services

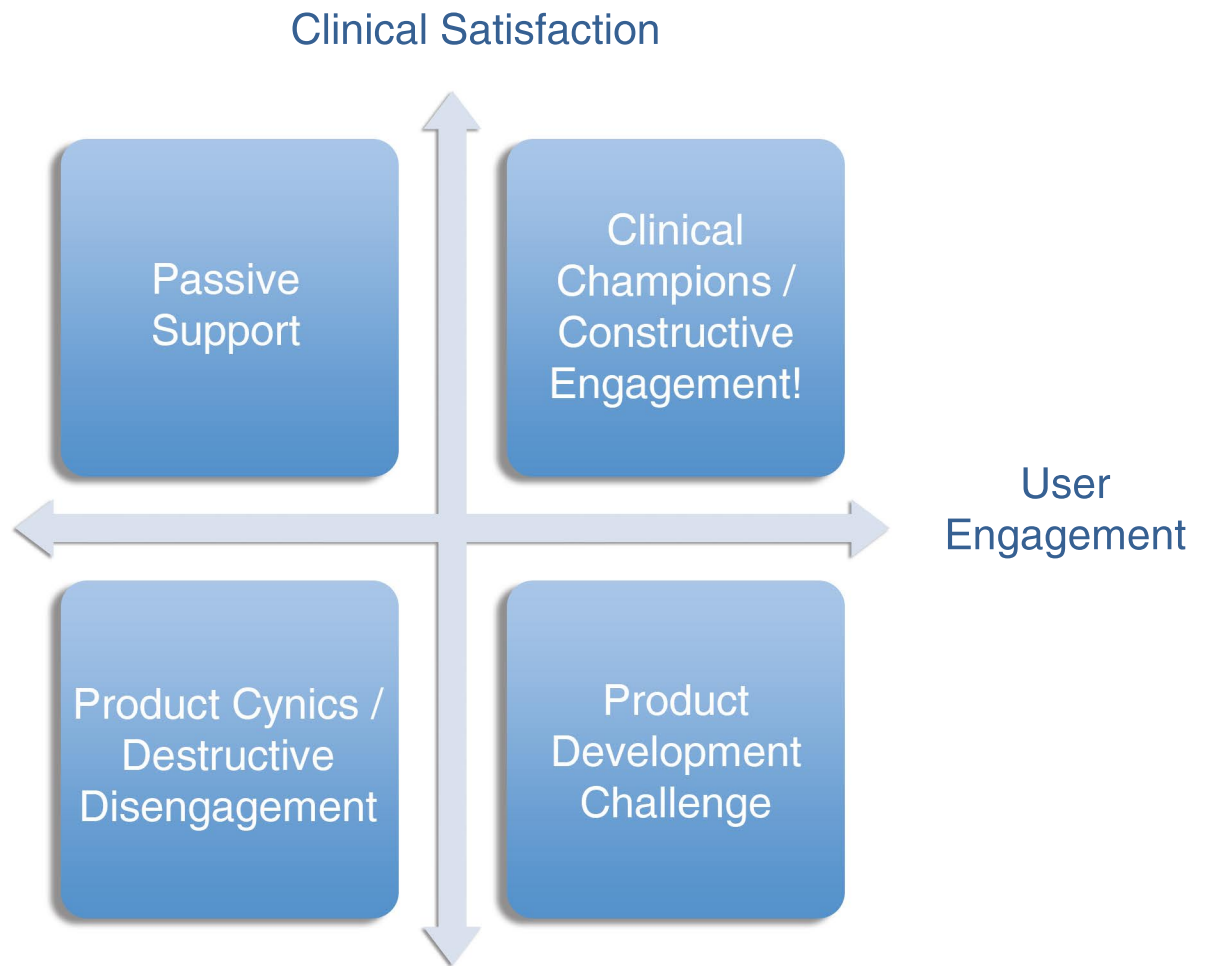


Figure 2 – The Clinical Engagement Matrix

Clinical Champions

A company that has clinical champions engages potential users at every stage of the pre-sales process all the way through to product deployment and support. These companies have secured constructive engagement from clinicians. High user engagement generates information and feedback in which these companies use to continually improve their products to satisfy the requirements of their users.

Product Cynics

These companies force their solutions on clinicians through sales channels without any direct form of user engagement during pre-sales or product development to support deployment. Clinicians are destructively disengaged and will actively avoid using a company's products until they are phased out.

Passive Support

These companies have successfully sold their products to healthcare providers and their systems have generally been received well in terms of clinical use. However, there is minimal direct engagement with clinicians and a lack of any brand familiarity. These companies need to engage this passive user base more directly to secure clinical champions to promote the brand and increase sales.

Product Development Challenge

These companies face a unique challenge as they actively engage clinicians on a regular basis to secure product feedback. However, a lack of understanding of the clinical environment and language means they face difficulties translating feedback into new product development.

How We Can Help

We're Doctors

At AbedGraham, we've worked with over a dozen medical specialties in the UK so we know the granular details of clinical workflow and its pain points. More importantly, we speak the same language as both clinicians and management, and can ensure your message resonates during the critical pre-sales process.

We're Regulatory Experts

When it comes to the National Health Service (NHS) we regularly offer detailed guidance about its evolving structure, reimbursement systems, procurement pathways, performance policies and IT adoption trends. We can help you refine your business case so it demonstrates clinical, organizational and financial ROIs.

We're Market Experts

The team at HIT Consultant are considered industry leaders when it comes to providing up-to-the minute analysis of the dynamic and broad healthcare informatics sector. Through our partnership, they can provide extensive advisory and research services for organizations looking to tap into the US market.

For further details:

Visit us today at www.abedgraham.com

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