

IT Project Implementation in Veterinary Practice

by: Andrea K. Wright, DVM, MVSc, Technology Manager, Butler Schein Animal Health

A cost benefit study to analyze the financial effects of electronic medical records systems in ambulatory primary care physicians resulted in an additional \$86,500 per provider over a five year period⁴. We can't directly extrapolate from human medicine to veterinary medicine, but we can learn from the huge Information Technology (IT) projects involving electronic medical records and IT implementation. The primary benefits of implementing an electronic medical record in this study⁴ were: savings in drug expenditures, improved utilization of radiology tests, and better capture of charges with decreased billing errors. In the article, "Making the Business Case for Hospital Information Systems - A Kaiser Permanente Investment Decision"², the authors make a case for Kaiser Permanente to invest three billion dollars over eleven years to deploy electronic medical records systems. The benefits that would be relevant to our veterinary medical facilities are:

Decreased Operating Expenses

- Increased staff billing efficiency
- Increased clinical support staff efficiency
- Reduction in lab expenses
- Increased medical records efficiency
- Reduction in forms expenses
- Decreased medical records supplies and storage expenses
- Redeployed space at hospitals

Increased Revenue

- Increased appropriate billing on existing patients
- Increased cash collection
- Improved pricing accuracy

Five success factors that were identified as critical to the success of this project were also highlighted in the article "Five Constants of Information Technology Adoption in Healthcare"¹. These are: proper use and maintenance of the IT budget, role of supportive leadership, the use of project management, the process of implementation, and the significance of the end user involvement.

What is your current IT budget for a special project like this, or simple ongoing maintenance? Many veterinary budgets do not include an IT area. Perhaps one of the most significant barriers to successful IT integration is insufficient funding. Nearly 60% of IT executives who responded to a recent HIMSS leadership survey predicted an increase in their IT budgets of less than 10 %¹.

Opinion leaders, well respected and senior level individuals in any organization are those who can champion a new IT project¹. Find these team members and get their buy-in for the project or it will fail. A study about why physicians in some Canadian provinces did not implement electronic medical records available to them found that engaging key medical players is one of the key metrics for success³.

Project management moves a project from start to finish by establishing and monitoring goals regarding costs, scheduling and quality¹. A project manager should be assigned within the clinic in addition to relying on your vendor project manager. This project manager should form teams and assign tasks to accomplish the goals of the project.

Implementation is the actual physical installation and use of the new IT product. The complexity of new software and technology products can lead to barriers for successful implementation. One of these barriers is the lack of proper testing of new software and equipment¹. Try using the new product in your environment if possible, or find directly comparable clinics that are also using the software or product in the same environment.

The last success factor for a successful implementation seems rather obvious, but is often overlooked. The end user must actually use the software or new technology to perform their job. Include them in the evaluation and implementation process. Overall, the focus should be on fitting the end users' needs and not fitting the user to the technology¹.

References

¹Bernstein, M., McCreless, T., & Cote, M. (2007). Five constants of information technology adoption in healthcare. *Hospital Topics*, 85(1), 17-25. Retrieved from Retrieved from research starters- Business database

²Garrido, R. T., Jamieson, L. L., & Wiesenthal, A. (2004). Making the business case for Hospital Information Systems- A Kaiser Permanente Investment Decision. *Journal of Health Care Finance*, 31, 16-25. Retrieved from Retrieved from Business Source Complete database

³Keshavjee, M. K., Singh, B., & Pairedeau, N. (2009). Failure of electronic medical records in Canada: a failure of policy or a failure of technology?. *Studies in Health Technology & Informatics*, 143, 107-114. Retrieved from Retrieved from CINAHL Plus with Full Text database

⁴Wang, Samuel J A cost-benefit analysis of electronic medical records in primary care. (2003, April 1, 2003). *The American Journal of Medicine*. Retrieved from

This column is published monthly in this magazine. Questions or feedback should be directed to: awright@butlerschein.com.