Implementing an electronic medical record (EMR) is the single most complex and expensive IT project that your hospital will ever undertake. It is a high stakes game, requiring multiple years, an army of IT workers and the input of hundreds of clinician end users. Patient lives, clinician satisfaction and your hospital’s financial future and reputation depend on getting it right.

Given the magnitude of the strategic investment, one would think that most hospital CEOs and CIOs would want a knowledgeable, experienced systems integrator on the team. And yet, over the past few years we have seen a number of hospitals try to go it alone, working only with a small workforce of resources provided by their EMR vendor. What is fueling this trend? What results have been achieved? Is there an affordable, less risky option?

Do You Need a Systems Integrator to Implement an EMR?

Why are some hospitals working without a systems integrator?

Since the passage of the American Reinvestment and Recovery Act of 2009 (ARRA), we have seen dramatic growth and maturation in the EMR market in the United States. In an effort to procure partial government reimbursement for the implementation and “meaningful use” of electronic medical records, hospitals have invested in EMRs, most commonly by either:

1. “Doubling down” on their investment in their current EMR vendor
2. “Jumping ship” to the rapid deployment of another EMR vendor

Since the passage of ARRA, results have been mixed. On the positive side, we have seen the percentage of hospitals at HIMSS EMR Adoption Model Stage 6 or 7 grow from less than 2% of U.S. hospitals in the first quarter of 2009 to more than 16% of U.S. hospitals in the first quarter of 2014. In addition, there have been published case studies that have associated the use of mature EMR platforms with reduced utilization of medical services, reduced medication errors, more efficiently delivered care and improved clinical outcomes. But the costs of this investment have been universally astronomical and the benefits only inconsistently achieved.

One reason for these mixed results may be a relative under-investment in systems integration. In an effort to curb implementation costs, some hospitals have chosen to limit the integration of their EMR to other hospital IT systems and/or limit the use of external systems integrators. In some cases, this has led to on-time/on-budget implementations, but has also led to limits on the benefits achieved. In other cases, it has contributed to chaotic implementations with disastrous clinical and financial results.
Accenture has studied these outcomes and believes there is an emerging pattern that may be instructive to future hospitals considering the use of a systems integrator in their EMR implementation:

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>May be OK to work without a systems integrator</th>
<th>Strongly consider the use of a systems integrator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital or System</td>
<td>Single hospital</td>
<td>Hospital system</td>
</tr>
<tr>
<td>Community or Academic</td>
<td>Community</td>
<td>Academic</td>
</tr>
<tr>
<td>Size</td>
<td>Small/Medium</td>
<td>Large</td>
</tr>
<tr>
<td>Maturity of clinical governance</td>
<td>Mature</td>
<td>Immature</td>
</tr>
<tr>
<td>Successful track record of care standardization</td>
<td>High</td>
<td>Low</td>
</tr>
<tr>
<td>Maturity of IT capability</td>
<td>High</td>
<td>Low</td>
</tr>
<tr>
<td>Size of IT workforce</td>
<td>Large</td>
<td>Small/Medium</td>
</tr>
<tr>
<td>Number of systems to be integrated</td>
<td>Small</td>
<td>Medium/Large</td>
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</tbody>
</table>

Is there an affordable, less risky option?

Accenture believes there are prudent, cost-efficient ways to reduce the risks of an EMR implementation while also improving your hospital’s achievement of verifiable and meaningful benefits on Day 1. We have studied the impact of our work on hundreds of EMR implementations and believe that a systems integrator can add the greatest value in the following areas:

**Clinical Governance**

Establishing and incenting robust Clinical Governance. Every organization struggles with this because of a variety of factors, including poor definition of the end state, unclear responsibilities and accountabilities, overlap with multiple committees and the speed with which decisions must be made. Nimble, responsible and accountable clinician governance can enhance your hospital’s ability to define clinical value at the outset, prevent delays in design and scope creep in build, and recognize quantifiable value soon after go-live.

**Organizational Readiness**

Organizational readiness and clinician change enablement. Preparing thousands of clinicians for Day 1 requires proven methodologies and tools. All hospitals are accustomed to training new personnel to utilize new processes and equipment as a normal part of doing business. But rarely do hospitals need to train everyone for the events of single day, “big bang” go-live. Accenture believes a blended team of consultants plus your own personnel can minimize the risks to Day 1, while laying a strong foundation for EMR optimization beginning on Day 2 and beyond.

**Clinician Project Management**

Clinician project management. Well-designed clinical workflows and clinical content are the keys to safe, effective healthcare delivery and end user satisfaction. Utilizing a team of experienced clinician project managers and facilitators can help your clinicians design an EMR platform that truly will meet their needs.

**PMO**

Standing up an effective PMO (project management office). Implementing an EMR is the most complex IT project your hospital will ever undertake. There are a lot of moving parts. The implementation spend rate is staggering. On-time performance is critical. Partnering with a systems integrator with a reputation for world class PMO can not only dramatically reduce risk, it can augment your hospital’s internal PMO capability through the use of proven, industrial-strength processes and tools.

**Conclusion**

Some EMR implementations can be successful without the use of a systems integrator. Accenture believes that the majority of complex EMR implementations will benefit from the targeted use of a systems integrator. Further, we believe that focused use of a systems integrator can reduce risk, save money and lead to earlier recognition of value.

**Accenture: Insight Driven Health**

Insight driven health is the foundation of more effective, efficient and affordable healthcare. That’s why the world’s leading healthcare providers and health plans choose Accenture for a wide range of insight driven health services that help them use knowledge in new ways—from the back office to the doctor’s office. Our committed professionals combine real-world experience, business and clinical insights and innovative technologies to deliver the power of insight driven health. For more information, visit: www.accenture.com/insightdrivenhealth.

**About Accenture**

Accenture is a global management consulting, technology services and outsourcing company, with approximately 289,000 people serving clients in more than 120 countries. Combining unparalleled experience, comprehensive capabilities across all industries and business functions, and extensive research on the world’s most successful companies, Accenture collaborates with clients to help them become high-performance businesses and governments. The company generated net revenues of US$28.6 billion for the fiscal year ended Aug. 31, 2013. Its home page is www.accenture.com.

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