A sales representative of a health informatics publication posed an ‘age old question’ to me recently – “Do IT vendors understand hospitals?” Now in my opinion, this particular question is an extremely tricky one because

- Health IT solution providers come in all make and model, shapes and sizes
- How does one define the level of understanding required to be consider sufficient?

The adoption of Information Technology (IT) in the modern day hospital is one of high complexity; not only due to the technical issues involved but also due to the workflow requirements (working preference resulted from culture, experience and environment) as no two hospitals in the world share the exact same workflow (even if they are serving the same patient’s segment.), each solution implemented is unique in its sense. The good news is, there are several good practices and guidelines that can be adopted to ease the implementation process.

For effective communication to take place, it is vital to ensure that health IT solution provider is not just another traditional IT company looking to penetrate the healthcare sector for revenue purposes. Take effort in assessing if they have a rich history of successful implementations in the healthcare industry and if their niche / specialty fulfil your requirements (a company famous for their Laboratory Information Systems doesn’t guarantee that their Electronic Patient Records are top notch).

Spend some effort to check if the solution provider of interest possesses;

- Specialists with the relevant domain expertise in your region to assess your needs (workflow differs from regions).
- Technical expertise to implement the solution. Certified infrastructures engineers might be clueless when it comes to databases or interface / integration work.
- Is the solution provider really just medical equipment manufacturer trying to become Health IT providers? (It makes a huge difference).
- Have they implemented similar solutions before? Locally? Just because their overseas counterparts have done something similar doesn’t automatically translates to having similar expertise locally.

On the other side of the coin, the hospital has to pay attention on “who” they send as representative for technical and workflow discussion.
Would a system analyst from the information system department be able to commit on the workflow requirements of the medical discipline involved?

Would the paramedical staff be able to advice on the features and workflow preference of the diagnosing physician?

Does the representative comprehend the possibility and limitations of health IT solution being implemented? (E.g. are they expecting a Computer Aided Diagnosis unit to replace a physician?)

Does the representative have decision making authority? Or would the representative need to consult an internal team?

While the complexities are daunting and the journey can be rough, fruits of success can still be achieved with effective communication, expectation, project management and support from the correct expertise. Most importantly, see your solution provider as a partner, not a 3rd party vendor, a good working relationship goes a long way.

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