The Best Laid Plans

By Michael McBride, Editor-in-Chief

Okay “Tom Daschle will not be the next Secretary of the U.S. Department of Health and Human Services (HHS) after all. Such is life in politics; nevertheless, the thoughts expressed in my past two columns still apply. HMT has high hopes that HHS will continue to play a significant, positive role in helping to shape America’s future healthcare system. One in which technology is used appropriately to help lower the overall cost of healthcare, while improving patient safety and enabling healthcare providers to accomplish their clinical and financial goals. This is not too much to ask and information technology can be part of the solution, but not the whole solution.

It’s easy to become myopic in healthcare. Vendors produce solutions to problems bureaucrats claim to be crises, while providers stand steadfast on antiquated methods and training because for them, personally, it works. Editors can become myopic too. A recent conversation with an M.D. reminded me that at the other end of the healthcare IT (HIT) stick awaits the “forgotten man” if you will.

Legions of healthcare providers “men and women, young and old” are expected to operate this HIT regardless of its effectiveness, its inherent usability or their personal ability to do so.

The physician expressed to me his concern over interfaces that require a level of typing ability he does not possess. (Nor do many physicians, according to him.) “Typing was not part of my curriculum in medical school,” he said. He told me of a friend radiologist (also a non-typist) who is forced to use the hunt-and-peck method to input notes into the hospital’s new not-dictation-friendly information system, which dramatically increases the time it takes her to do so. “What developers don’t realize is that we should be dictating this stuff,” he said.

We must always consider the immediate effects technology might have on end-user caregivers. While I firmly believe that EMRs, e-prescribing and telehealth are crucial innovations that will help us survive the Boomer onslaught and, ultimately, will benefit all Americans, HIT should only be implemented when and where it can do more good than harm.

HHS and the other government organizations tasked with finding HIT methods to improve healthcare must consider the individual end-user, as well as healthcare organizations and the industry in general,
when determining solutions to America’s healthcare crisis.

Comments

Posted by: Ron Lehr on Tuesday, April 14, 2009
O’Bama has no clue as to what needs to be done. We are in a downward spiral economically and this man hasn’t the slightest idea of how to solve this problem. I would also like to state this man is not my president. I did not vote for him and I believe he is in office illegitimately because he is not a naturalized citizen of the United States of America.

Posted by: B. G. Dietz on Sunday, April 05, 2009
Keep the health care system we have. It may not be the best but it is better than what the Obama administration wants to implement.