



# Management challenges: "Big Bang" change of Electronic Health Records in a hospital system.



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# Main Objectives for EHR at Odense University Hospital

- Quality
- Efficiency
- Management
- Patients have access to their own health records



# Background

- The region has decided to introduce EHR based on a database shared by all 5 hospitals
- The health professionals at Svendborg Hospital have used EHR for more than 10 years
- OUH has 8000 users in the new EHR
- Heads of the clinical dept. opt for a Big Bang implementation
- Svendborg is a completely digitalized hospital with an existing and complex EHR
- Major structural/organizational changes are introduced concurrently at the hospital

**The  
Development  
of EHR  
at OUH**

*MediCare by  
Acure/IBM*

1,800 reg.users

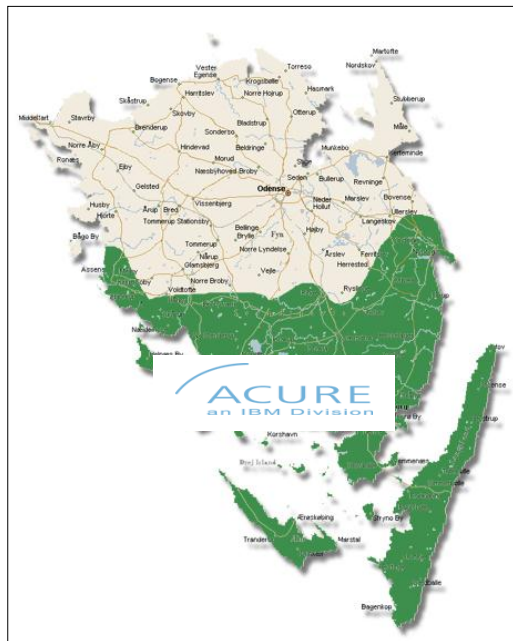
300 users can  
operate the system  
simultaneously

*MediCare by  
Acure/IBM and  
COSMIC by  
Logica/Cambio*

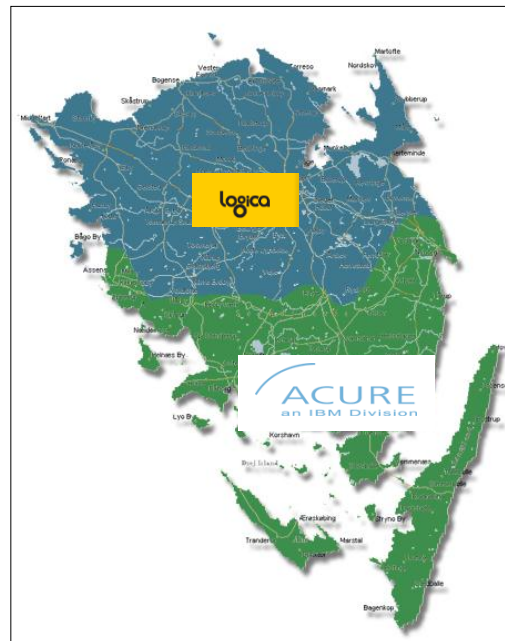
11,000 reg.users

1,600 users can operate the system  
simultaneously

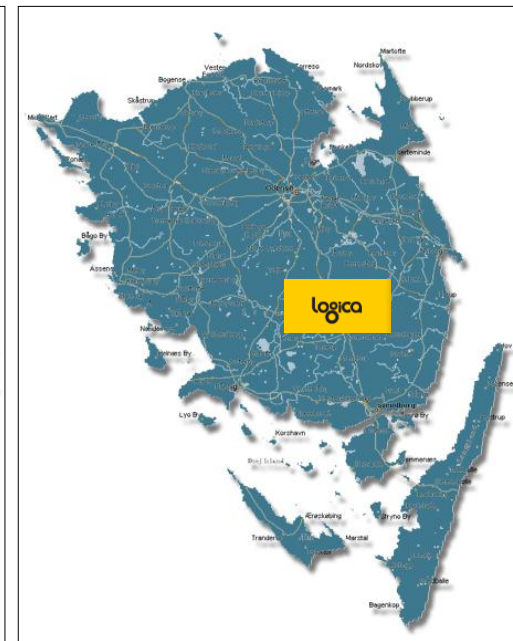
*Cosmic by  
Logica/Cambio*



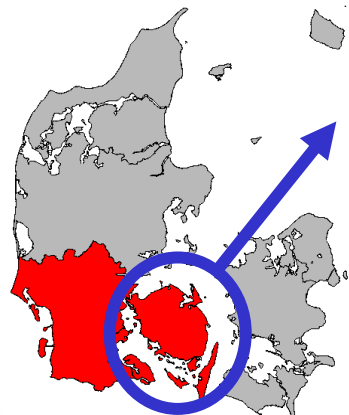
2004



Oct. 2009



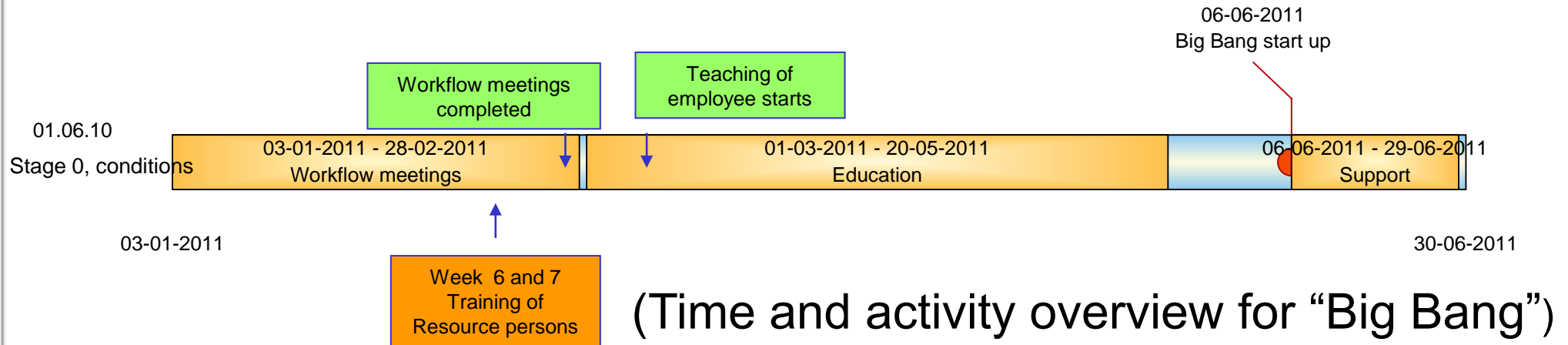
2011



# Managerial challenges

- Optimizing cooperation
- Limited resources
- Coordination with major competing projects
- Maintaining the momentum
- Securing the business solution

# Plan and Method of Implementation



## Script - Main activities

- Preparation and conditions
- Workflow meetings
- Education
- Presence support

**1<sup>1</sup>/<sub>2</sub> years**

# The extent of the “Big Bang”

- 1600 employees in 2 hospital units – Svendborg and Nyborg
- All surgical and medical functions in one go
- Change from MediCare to COSMIC, 6th June at 12 pm
- 60 Resource personnels from the clinical level were included in the support period

# What was easy and went well?

- Experiences gained from the COSMIC implementation at OUH, Odense were used.
- Efficient project organization
- Establishment of 2 external teaching facilities
- Successful education in COSMIC
- The collaboration with the clinical departments
- Development and implementation of integrations to other IT systems

# What was difficult?

- Handling user resistance
- The period of education was too long.
- Kicking the habit of old routines
- Managing and coordinating support teams

# What went wrong?

- The decision to use OUH's templates within the same specialty
- Commissioning date vs summer vacation.
- The infrastructure

# Recommendations for others

- “Big Bang” as a method cannot be recommended
- Maintain focus on the fact that it is a great challenge for clinicians to switch EHR systems
- Face: Opposition to change and retaining old routines
- Do not shorten training period
- “Unlearning” takes the focus in the teaching situation

# Managerial tasks

- Avoid, support, and remedial changes to the schedule
- Keep up the spirit in spite of possible clinical deterioration of functions
- Prepare and perform the ongoing adjustments
- Keep stakeholders informed
- Combine the changes with other major organizational projects and future plans

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# Conclusion

- The Big Bang implementation method is only applicable in relation to limited numbers of medical personnel – suggestion?
- The Big Bang method does support the wish for a quick reestablishment of productivity
- Suppliers and IT staffs need to possess sufficient clinical knowledge
- It cannot be recommended to perform the implementation of an EHR containing a major negative gap compared to the existing EHR
- This Big Bang method can only partly be extrapolated to the transition from a paper record to an EHR



# Thank You