



## Guidelines for Applying to the Nicholas E. Davies Ambulatory Care Award of Excellence January 2007

In 2006, HIMSS announced the Davies Award of Excellence was extended to include all ambulatory physician practices. The purpose of this award is to recognize ambulatory practices that have succeeded with implementations of Electronic Health Records (EHR) in their practice and specialty settings and to share their approaches and lessons learned more broadly.

The Davies Award Program was originally created by CPRI-HOST in honor of Dr. Nicholas Davies, an Atlanta-based physician who was committed to improving patient care through better health information management. He was a member of the Institute of Medicine's patient record study committee. In April 1991, he was tragically killed in a plane crash with Senator John G. Tower (Rep.) of Texas. His ideals live on through the Davies Recognition Program now managed by HIMSS. The Davies Award Program has three tracts; Organizational, Ambulatory Care and Public Health which together have awarded more than 30 hospitals, private practices and public health efforts for their exemplary HER implementations.

Recipients of the Davies Award for Ambulatory Care will be invited to give their case presentation at the HIMSS Conference in 2008. The winners must also agree to participate in a "lessons learned" panel discussion at the conference and sign a copyright agreement for including the application paper in the conference proceedings.

### **Who can apply?**

Independent ambulatory care and specialty medical practices can apply for the award. Vendors may not apply but can assist in the preparation of the application. Physicians and other staff in a qualifying practice need to have incorporated the EHR into routine care and the operation of the practice. Because the Davies Award measures success in terms of the value achieved through implementation, the practice also needs to have been using the system long enough to describe--and provide evidence of--improvements in efficiency, quality, service, staff or patient satisfaction, as appropriate to the local expectations that led to the investment in the first place.



### **What counts as an EHR?**

The EHR in use must capture and manage medications, the problem list, and at least one other type of patient information (e.g., laboratory test results, notes) and provide some real-time clinical decision support such as drug checking (drug duplication, drug-drug interaction, drug-allergy checking). *This is the bare minimum functionality, and organizations with more robust EHR systems are likely to have a much more impressive story to tell about what they have achieved!*

### **What is involved in applying?**

The application is an essay, such as you might submit for publication, covering the topics requested below under Guidelines. The Program Committee reviews submitted applications to select finalists and recipients. Submission of an application indicates acceptance of the judges' decisions. There is no appeal process. Papers are also published to highlight accomplishments and share approaches and lessons learned. The appropriate length is 10 to 15 pages. Longer submissions are discouraged. Application deadline for 2007 is **April 30, 2007**. Applications should be sent electronically to David Collins, HIMSS, Manager, Davies Awards Program at [dcollins@himss.org](mailto:dcollins@himss.org).

### **Ambulatory Care Application:**

#### **Section A. Identifiers (First Page of Application)**

1. Name and Title of Submitter:
2. Practice Name:
3. Address:
4. City: State: Zip Code:
5. Telephone: Fax:
6. E-mail: Website:
7. Number of Physicians in Practice:
8. Number of FTEs (list by staff category):
9. Provide detailed information regarding any commercial/employment agreements with the vendor/s of EHR hardware/software. If no such arrangements/agreements exist please indicate "No commercial/employment relationships with any vendor of our EHR system."
10. Annual Number of Patient Encounters:
11. Please list the names of the members of the EHR Implementation Team (who will all be considered authors of the application):
12. Please submit the application electronically to David Collins at [dcollins@himss.org](mailto:dcollins@himss.org) by **April 30, 2007**.

#### **Section B. Guidelines for Application (Second-Fifteenth Page of Application)**



These guidelines present the outline and topics that must be addressed in the application paper. **Please be sure to answer or address each question or area, in the order they are asked.** Please call David Collins at 703-562-8817 with any questions.

### **The Organization**

Provide a general description of the organization—the sites, size, and organization of the practice and the patient population it serves.

### **Management**

- a. Business Objectives—Describe why the practice decided to implement a EHR and what you hoped to accomplish by doing so. Include specific expectations framed in a business case or used to justify the investment. (Note that this will provide the framework for discussing what you have accomplished)
- b. Project Organization—Describe roles and responsibilities for managing the EHR effort, including accountability for success, and the resources assigned.
- c. Clinical Objectives – Describe if the practice had clinical objectives for implementing an EHR. Did this influence the choice of EHR? If so, define the clinical objectives and how they were measured. Better implementation of
- d. Other Objectives– Were there any other objectives in implementing an EHR? For example was there any time gain realized to lead a more balanced life, i.e., are you or your staff leaving the office earlier, or spending less time on work in “off patient” hours?

### **Implementation**

- e. EHR System—Identify the product your organization selected and the functionality it provides (data access, data entry, decision support, workflow and communications, etc.). Briefly describe the technology, including interfaces with other systems and the user interfaces employed, and the role your practice plays in managing the technology.
- f. System Implementation— Describe the planning process for your Practice’s EHR implementation, including the implementation goals, how they were developed and accomplished. Include details on the practice’s ability to plan and accomplish a smooth system implementation with minimal disruptions to patient care. Describe your approach and the rationale for your approach, for rolling out the EHR system. For example, did you do a phased in the rollout or all at once? Include methods used for encouraging adoption and managing change in the Practice’s culture.

Describe the practice’s project governance and staffing plan, including details on individual staff, group, team, or committee roles, responsibilities and time commitments. Describe the EHR vendor’s roles and responsibilities. Detail who was responsible for the integration or interfaces set up and testing. Describe how your practice accomplished purchasing and installing the hardware required to support the EHR. Describe how you monitored and evaluated participants and



how they completed their roles and responsibilities. For example, who was responsible for customizing the clinical content of the EHR to the needs of your practice? Was it your EHR vendor, your staff, or a team effort?

Describe the practice's training, education, and support strategy.

Include details on how, when, and where training was accomplished. Detail your training methods and thought process that went into your training approach. For example; did you target specific user groups, nurses, physicians, front desk or did you train user teams? Describe the model used for supporting users during the initial implementation and post implementation phases.

Explain your strategy for the transition to the EHR. What systems or models did you develop to support the practice during the transition or phase in process?

For example, how did your practice enter historical clinical data? Did you key in the data, or scan in old records, or both, etc.? When did you enter the data?

During the first visit on the EHR or the day before, etc.?

Describe the successes and failures of your practice's implementation process.

List lessons learned through experience that could have benefited the effort from the outset. Describe in detail the main areas that were or were not successful and how it affected or changed your strategy. Include the process used for tracking the estimated and actual implementation schedule. Discuss how your practice encouraged broad participation in the EHR implementation planning and process. Describe how you measured the success of your EHR implementation plan and the training of your staff.

g. Current State—Characterize the current state of implementation in terms of the intended users (physicians, nurses, etc.) and uses of the EHR (capture of notes, prescriptions processed). Describe the clinical decision support in routine use (could include integrated displays of patient data, note templates, order sets, rules-based prompting).

## Value

h. Success in Meeting Objectives—Using the Business Objectives discussed above to organize the discussion, review the extent to which your practice has achieved the expectations it set for the EHR system. Formal research is ideal but not required. Utilize the best qualitative and quantitative evidence available, including physician and patient satisfaction and descriptions of transformed processes, as well as measures of quality, process efficiency, productivity, customer service, etc. **Since the implementation of your EHR, please describe your ongoing areas of improvement.**

i. Costs and Benefits Offsetting Costs— Describe the costs of the EHR effort, including those of implementation, and any financial benefits realized to date that offset that investment. If the Business Objectives were based on a formal Return-on-Investment Analysis, describe the anticipated and actual return.



### **Lessons Learned**

j. Critical Success Factors—To what do you attribute your success? In hindsight, what do you wish you had known before you started? Many other ambulatory practices hope to implement EHRs and need as much advice as they can gather. Share your thoughts on what is important—in organizing the effort, in purchasing an EHR, in achieving the necessary technical performance.