Exploring Leadership Strategies Employed by a Newly Hired Informaticist to Drive Change in an Organization

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One of the nation’s leading health systems and academic medical centers, Houston Methodist consists of seven hospitals and one Long Term Acute Care Hospital (LTACH).

Houston Methodist began their conversion to a new EMR in May 2015 starting with their flagship academic hospital at the Texas Medical Center. The six community hospitals and 1 long Term Acute Care Hospital soon followed in the phased implementation plan.

Houston Methodist St. John was in Phase 2 for Go-Live implementation. Operations needed someone to lead the change effort and be the support for staff/providers post Go-Live.

Nurse Informaticist was hired 2 months prior to Go-Live to lead its local roll out efforts.

### Purpose/Objectives

As a newly hired Informaticist to lead change in an organization, there were many challenges that come along with that role:

This presentation will discuss successful Leadership Strategies that were used by the Nurse Informaticist to drive change at Houston Methodist St. John Hospital.

### Challenges
- Unfamiliar with hospital culture and organizational structure
- No credibility with organization
- Not an expert in the EMR application being implemented.
- Staff resistance to change

### Background/Introduction

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### Strategies

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<th>Inspire the Vision</th>
<th>Build Trust &amp; Relationships</th>
<th>Effective Communication</th>
<th>Develop Competence</th>
<th>Remain Visible &amp; Approachable</th>
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| a) Encouraged staff to see the big picture  
b) Created an excitement about the Go-Live  
c) Identified and celebrated short term wins  
d) Acted as a change agent as new processes were developed  
e) Encouraged and Empowered employees to be involved in decisions/processes before, during and after Go-Live | a) Fostered collaboration with CNO  
b) Met 1:1 with managers, directors, key physicians and staff  
c) Leveraged resources within the hospital system  
d) Established relationship with other Informaticists within the system  
e) Built a team of Super Users | a) Clear communication to leaders/staff on what to expect with the conversion  
b) Clear communication about limitations of the system  
c) Communication given in multiple forums (big/small meetings, newsletters, one on one, in-services)  
d) Detailed checklist of activities to be completed at department and Individual user level | a) Attended multiple training sessions for various specialties in preparation for Go-Live for personal competence  
b) Created a learning climate for the staff  
c) Held practice sessions for staff prior to Go-Live, where staff could practice on the new system with scenarios. | a) Rounded on units before, during and after Go-Live  
b) Supported face-to-face interactions  
c) Remained responsive and willing to help resolve issues  
d) Created places and opportunities for informal interactions  
e) Adapted schedule to meet needs of the departments/staff |

### Results

1. Successful Go-Live with minimal issues
2. Trusted on-site support for providers and staff
3. Since implementation, a system upgrade was completed. Due to the foundation of super users and the relationships previously established, the Upgrade was completed with highest acceptance rate in the system - 95% (Calculated based on staff who reviewed and acknowledged upcoming changes in system).

### Acknowledgments

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### References