

## Meaningful Use Criteria: Dialogue

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***Calling all IT, quality, and clinical healthcare leaders. Your collective thinking, collaborative planning, and coordinated actions are needed—now!***

### The Future

National Health IT coordinator David Blumenthal has stated that the ability of clinicians to amass, analyze, and report healthcare quality measures lies at the heart of the HITECH strategy for using IT to transform the U.S. healthcare system. The key to “meaningful use” is to know how to measure performance and provide feedback to providers.

The strategic aim is to take existing quality measures and convert them into metrics that can be incorporated into electronic health records (EHR) in a standard form, and compared across practices and geographies. Many of the current proposed EHR-generated quality measures that apply to primary care providers are derived from National Quality Forum (NQF)-endorsed measures. New measures under development by NQF and other recognized organizations will also address the work of specialists. It is anticipated that future meaningful use objectives and measures will reflect emerging national priorities. Some of the requirements for meaningful use in 2011 are tasks that many providers already perform, but those for 2013 and 2015 will increasingly support improved patient outcomes.

So, what are you waiting for... the final criteria for meaningful use to be released? Let's move forward! We don't need the additional 2013 and 2015 criteria for the dialogue, collective thinking, and organizational learning that should be happening now.

### The Journey

- *The Goal of meaningful use* is to enable significant and measurable improvements to our population's health through a transformed healthcare delivery system.
- *The Vision of meaningful use* is one in which all patients are fully engaged in their healthcare. Providers have real-time access to all medical information and tools to help ensure the quality and safety of the care provided, while also affording improved access and elimination of healthcare disparities.
- *The Roadmap to meaningful use* is a matrix that outlines recommended timeframes, objectives, and measures. Updating this roadmap with meaningful use criteria has to be an ongoing, dynamic process.
- *The Vehicle to meaningful use* is a comprehensive EHR that effectively supports interoperability for care coordination; chronic disease management and preventative care; and accurate quality

measurement, reporting, and improvement—all while being easy to use. Clinical decision support is a critical EHR component.

- *The Driver to meaningful use* is an integrated, innovative healthcare leadership team.

### **Driver Dialogue**

This is a pivotal time for IT, quality, and clinical healthcare leaders to powerfully partner and tap into the collective intelligence and innovation of knowledgeable people. The incentives and reward mechanisms for quality measurement, reporting, and subsequent performance improvement have never been stronger, never more transparent. Now is the time to be in action, and you can start by addressing several key questions:

- Why measure?
- What should we measure?
- Who will measure?
- How will we measure?
- When should we measure?
- What do we do with the results?

All too often, organizational conversation—particularly around tough, complex, or challenging issues—lapses into debate (the root of which means “to beat down”), rather than dialogue. In debate, one side wins and another loses, both parties maintain their certainties, and both suppress deeper inquiry. Such exchanges do little to activate the human capacity for collective intelligence.

Dialogue—a discipline of collective thinking and inquiry, a process for transforming the quality and outcomes of conversation—is preferred, and strongly encouraged. Dialogue is an attempt to perceive the world with new eyes and holds the potential for entirely new kinds of collective intelligence to appear. This is exactly what is needed for healthcare organizations to achieve meaningful use of the EHR.

*Dr. Charlotte Hovet serves as the Medical Director of Clinical Informatics for the MEDITECH Solutions Group within Dell Services. She has demonstrated strengths in leading clinical transformation initiatives, providing results-oriented leadership, informatics knowledge and skill, and physician alignment strategies that drive change in a complex medical environment. She is a board-certified family physician with more than 20 years of clinical experience. For more information about Dr. Hovet or how she might be able to help you, contact her at [meditechsolutions@ps.net](mailto:meditechsolutions@ps.net).*