Sophisticated Web Sites Lend a Competitive Edge

BY THOMAS C. LAWRY

eb services typically evolve through three phases:

• Informational. The Web site is static, providing users with basic information (e.g., the services available at a hospital).

• *Interactive*. The site responds to data submitted by users (e.g., it can complete a health risk appraisal).

• *Transactional*. The site operates as an extension of the facility (e.g., one can use it to schedule appointments or pay bills).

Unfortunately, healthcare organizations have tended to lag behind other enterprises—banking and retail business, for example—in the development of Web services. Most hospital sites are still in the informational phase.

But the Sisters of Providence Health System (SPHS), Seattle, is one healthcare organization actively experimenting with interactive and transactional Web capabilities. SPHS's Oregon region is using the Web to increase customer convenience while increasing the efficiency of its hospitals and physician practices.

ACCESS TO MEDICAL INFORMATION

SPHS has made it possible for 120 patients of a Portland, OR, physician practice to go online to look up their medical histories, review their medications, request prescription refills, make office visit appointments, and ask questions of their physicians. (A patient can also print out a card-sized medical status summary to carry in his or her wallet.) Although the patients don't have complete access to their medical records, they are given enough information to communicate with physicians' offices.

SPHS's experimental program appears to meet a widespread need. According to a recent survey, 80 percent of respondents said they would like to be able to use the Web to communicate with their physicians. Eighty-nine percent of healthcare executives surveyed said they expected such Web use to reduce patients' visits to doctors'



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offices. (The statistics are from Pricewater-houseCoopers, *Healthcast 2010*, Autumn 1999.)

"We believe that patients need to become more involved in their own healthcare," says Dick Gibson, MD, medical director of SPHS's information services. "The more information they have about their situations, the better they can make informed decisions about their health. By giving patients access to their medical records, SPHS is improving their care."

So far, 30 percent of participating patients have used the program to review their medical records. Forty-five percent have used it to send messages to the physician practice; of these, about half went to the front-desk staff and half to a medical assistant. "We're seeing about one message a day that requires the attention of a physician," says Gibson. "We think online messages are reducing the number of telephone calls patients make to physicians, but we'll need to study the results further to fully evaluate the program's impact on doctors' offices."

Early results indicate that both patients and physicians find the program valuable.

PREREGISTRATION FOR HOSPITAL SERVICES

Several years ago, SPHS consolidated the registration services of three of its hospitals in a single unit. Patients scheduled to receive hospital services call this unit to be interviewed by its staff. These interviews, the results of which are entered into SPHS's computerized records, constitute what the system calls "preregistration."

In August 1999 SPHS began allowing such patients to preregister by completing a questionnaire found on the system's Web site. The primary goal of online preregistration is patient convenience, says Rick Skinner, the regional chief information officer. "But even though a staff member must manually enter the questionnaire information into SPHS's registration system, online preregistration takes less time and is more efficient than the telephone interview process." In the

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Employ user feedback in testing and modifying online services.

it is recognizing that limited time and money require decisions about where resources are best used.

Think about prioritizing as clarifying, not as limiting. It will clarify issues for which a principled purchasing strategy is the only one you can accept, and it will also help you define situations in which another strategy might be more effective. A good question to help focus discussion is, If I only have the time and resources to focus on a specific number of core issues, and I have to make choices, what would those choices be?

The *process* of prioritizing may also be a worthwhile endeavor. In many organizations that are working to develop their priorities, it is helpful to have these discussions take place among various levels of the organization: among board members, among senior and middle management, and among staff.

FACTORS IN POLICY DEVELOPMENT

What informs the development of core values? Four basic factors can serve as starting points:

- Sponsorship and membership. The charism of the organization's sponsor is a critical starting point for policy development. Membership is also a rich source of information for the development of mission-based investing policy and the choice of screens.
- Catholic tradition. Our faith and church teachings provide clear signals.
- Peers. Ask your peers what they are doing; it will help inform your choices. It may also help to initiate a more thoughtful dialogue in the healthcare community about screening.
- Financial impact. As stewards and fiduciaries, you must be cognizant of the impact that your choices may have on your ability to achieve the desired returns. Financial impact is not a determinant in screen selection, but responsible stewards must be aware of any potential impact. Look closely at assertions by any investment manager who says that any screens will affect performance. Challenge the manager to present a credible case to support this assertion.

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future, SPHS plans to integrate online preregistration with its internal computer registration system, thereby making the process even more efficient.

ONLINE CLASS REGISTRATION

SPHS is also using the Web to promote community health classes provided by its Portland-area hospitals.

The system formerly printed catalogs of such courses and mailed them out. Interested persons would then either mail back a completed registration form or sign up over the telephone. Since calls could be taken only during office hours, many people found this method slow and frustrating.

SPHS continues to print course catalogs and register prospective students over the phone and in person. But in 1999 it put both class listings and registration online. As a result, interested persons can now peruse course offerings, check class sites and dates, register for classes—and even pay tuition—over the Web. And they can do so 24 hours a day. "Twenty percent of all participants now use our Web site to choose classes and register for them," Skinner says.

LESSONS LEARNED

SPHS's experience shows that hospitals can use the Web to change the way they work. In doing so, the system has learned some important lessons.

Think about Consumer Convenience "We've learned something about what consumers find valuable," Skinner says. "They respond to online services that make access easier and more convenient. We look for ways to reuse existing information and make routine processes better." By putting health class information online, SPHS has also saved money on printing and mailing catalogs; so online services can cut

costs as well as please consumers.

Look to Other Organizations for Ideas "Web truths and principles discovered by other industries can provide valuable lessons to healthcare," Skinner says. "We're using the Web to critically evaluate how we can improve our processes for communicating and sharing information."

Consider the Impact on Staff "Allowing access to personal medical information has turned out to be a hit with patients," notes Gibson, "but it has also increased the staff's workload. Increased patient satisfaction will eventually result in more efficient communications, but in the meantime we must take care not to give staff more work than they can handle."

Treat Initial Efforts as Opportunities for Learning Continuous quality improvement is an important part of Web services. For example, when SPHS put its preregistration form online, it discovered that the form was too long and cumbersome; it's now looking at ways to streamline the form. In general, SPHS has learned to employ user feedback in testing and modifying its online services.

THE WEB ADVANTAGE

Organizations such as SPHS understand that an investment in sophisticated Web services will, by increasing consumer satisfaction, pay large dividends in the future. Mere informational services are already becoming outdated. Organizations that provide interactive and transactional services will have a clear advantage over competitors.

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