



medSR

Measure Your IT Success Webinar

Questions & Answers

Q1 How often do you recommend doing this type of survey?

A The frequency of the survey often depends on how long it takes you to work through actionable items from the current survey. This could be anywhere from 12 to 24 months, depending on the complexity of your action plan. However, we generally recommend resurveying 12-18 months from the initial survey. This gives you the opportunity to validate progress and celebrate wins.

Q2 What if my team scores lower than I anticipated? Is there a way to kick start the planning process and generate some quick wins?

A If your team scores lower than expected, see it as a chance for improvement. Use the survey results to identify known weaknesses and uncover potential issues. Focus on addressing priorities, such as improving analytics if there's a deficiency in SQL report writers. Take advantage of the feedback to tackle low-hanging fruit problems swiftly, turning them into quick wins for your department. Embrace the constructive criticism and use it as an opportunity for growth and positive change.

Q3 My hospital doesn't have any written business priorities. How can this tool be useful if they haven't already created a list of business goals to work from?

A It's unusual for a hospital to not have set business priorities. However, if you are unsure of those or have not had them communicated to you, a good place to start is the organizational scorecard. The scorecard will show you what the business leaders in your organization deem important and the assigned satisfaction scores for those core

priorities. You can see this at the organization level, department level, and division level, such as home care or physician services.

Q4 Historically we have trouble getting our busy managers and department heads to respond to surveys. How does your approach differ in order to get a good feedback?

A Much of the difference lies in the upfront planning. We work with the CIO to craft messages through email, IT steering committee meetings, senior executive meetings, department meetings, etc. to ensure buy-in before the survey is initiated. Once the survey begins, reminder emails are sent through the survey organization InfoTech. Also, medSR staff are given a periodic report on who has responded to the survey. We follow-up with direct one-on-one emails encouraging each team member with individualized messages to help increase participation. We have achieved as high as 98% participation but see the average participation rate between 70% and 75%.

Q5 We already have more employee satisfaction surveys, physician satisfaction surveys, environment of safety surveys, and the list goes on and on. How do you get buy-in for this survey?

A As mentioned in the previous question, upfront planning is the key. You must ensure that the CIO Business Vision Diagnostic does not conflict with other important surveys conducted by the organization. That upfront buy-in may consist of sharing an example report so that leaders understand the type of information received from the survey. It is also important to share how the information obtained will be used.

Q6 Has participating in this project ever resulted in the ability to increase IT staff?

A Certainly, the effectiveness of this survey lies in its ability to drive actionable change. While it's not explicitly a staffing survey, the insights it provides can highlight areas where adjustments are needed. For instance, comments from different departments may reveal varying expectations, such as a Pharmacy Director expecting expertise from an analyst. This disparity in expectations can guide staff reallocation or additional hires.

In our experience, the survey pinpointed shortcomings in external facility technical support, even when internal support received high marks. Armed with this objective data, it successfully justified the need for an additional support person, showcasing the survey's tangible impact on staffing decisions. Therefore, participation in this project can indeed

lead to increased IT staff or strategic reallocation based on the actionable insights garnered.

Q7 You mentioned 13 core areas in the IT department. Do you mind sharing what those 13 core areas are?

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Clinical Applications, Analytical Capability and Reports, Work orders & Enhancements, Patient-Facing Systems, Innovation Leadership, IT Security, Data Quality, Healthcare Infrastructure, Service Desk, Project Management Execution, Administrative Software & Applications, IT Policies, Clinical Devices

Q8 Do you consider the follow up on these initiatives as tactical or strategic?

A We believe the follow-up for the survey includes both tactical and strategic items. For example, one hospital we worked with showed reporting and analytics as a core IT service that had low satisfaction. This identified need for reporting and analytics validated a perceived need and reinforced the importance of a strategic data analytics project. An argument may also be made that a series of tactical actions can be considered strategic to the organization. The survey will uncover some low hanging fruit that will yield some immediate results, but may also uncover more strategic needs as well.

For more information on how medSR can help your organization with our Business Vision Diagnostic, contact:

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