

3

WAYS DATA MALPRACTICE CAN RUIN A HOSPITAL



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3 Ways Data Malpractice Can Ruin a Hospital

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LEVERAGING THE POWER OF DATA

Electronic Medical Record (EMR) systems have made hospitals rich with data and enabled faster and more accurate decision making. Hospital executives recognize the value of promoting a data culture that effectively leverages the transformative power of data to advance clinical and financial outcomes. However, data has also proven to be a double-edged sword that introduces a slew of challenges.



Data breaches: cyberattacks may expose private patient data and result in severe financial penalties, damaged corporate reputation, adverse, legal action, and/or fraud as patient data gets traded on the black market.



Tunnel Vision: When healthcare is overly focused on data, it can obscure the human element and cause a gulf between patients and doctors.



Insider Threats: Hospital staff may not properly safeguard patient data out of negligence or accidental sharing of information with unauthorized individuals. Such disclosures put patient privacy at risk.



Negative Public Perception: Much of a hospital's performance is made public through the publication of clinical quality measures and the pressure to share cost information with the public. Such transparency may show vulnerabilities and attract competing players into a hospital's service area.

These pitfalls are often anticipated and hospitals have a game plan to address them. There are, however, other mishandlings of data that either go unnoticed or become accepted. We will examine how three such data malpractices can erode operational efficiencies and hinder a hospital's success.

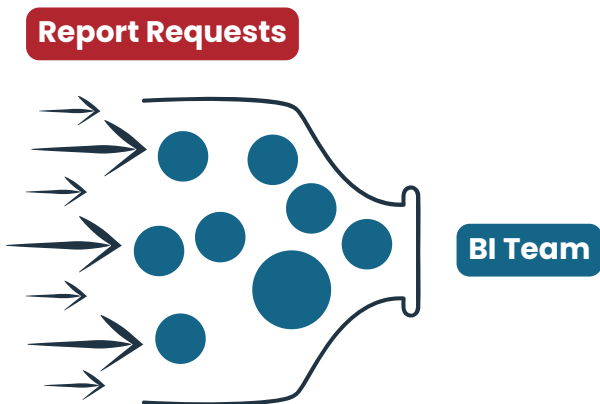


1

UNTIMELY DATA

In a hospital's complex environment, timely data is crucial for decision-making, such as for a CFO's investment or workforce management decisions and identifying revenue issues.

Unfortunately, timely access to this critical data is often lacking. Let's explore some of the reasons why delays occur.



The Data Dilemma:

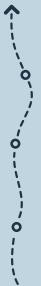
Raw data, requires processing and refinement to become useful. This involves resolving data quality issues that require specialized skills to navigate complex systems such as electronic medical records (EMR) and enterprise resource planning (ERP) systems.

The Reporting Bottleneck:

Typically, only a few experts in an organization can effectively retrieve and process data, usually within the reporting or analytics team. These teams often face overwhelming data requests, creating a backlog that turns them into bottlenecks, delaying critical information delivery.


**IS YOUR REPORTING TEAM A
BOTTLENECK TO INSIGHT?**

The User's Journey:




When users have business questions, they first check for existing reports, a cumbersome process. They often ask the reporting team for help, causing the team to interrupt their tasks to locate and verify reports. Follow-up questions about data accuracy and logic further increase the team's workload and add to the backlog.

The Risky Alternative:




Due to these delays, users may resort to creating their own reports and analyses, forming what are known as **shadow analytics teams**. While faster, these reports often lack the rigorous validation of the centralized reporting team, leading to the spread of unverified and potentially unreliable information.

The Consequences of Delays:



The ultimate consequence of these delays is that vital insights arrive too late, hindering timely decision-making. Users either accept these delays or turn to unreliable methods to get information. This underscores the critical importance of timely insights in hospital operations.

In conclusion, the lack of timely data is a significant issue that can cripple hospital decision-making processes. Addressing this challenge requires not only **refining raw data** but also **optimizing the processes and teams** responsible for data retrieval and analysis.



trust

2

UNTRUSTED DATA

Untrusted data leads to **"multiple versions of the truth,"** causing discrepancies in answers to basic questions like "How many patients did we see last month?"

Even when refined to specifics such as clinic visits or inpatient counts, differing answers arise from multiple data sources.

The Complexity of Multiple Data Sources

When hospitals acquire other facilities, data scatters across multiple databases, complicating information compilation. Even with a single data source, varying filters—such as date ranges, service areas, or patient coverage—lead to different results, sparking debates about accuracy and trustworthiness.

The Vicious Cycle of Distrust

When data is untrusted, it becomes useless. Despite data governance efforts to clarify definitions and standards, the core issue persists. Defining measures helps, but users still struggle to ensure report definitions align with official standards.

Linking Definitions to Reports

For users to trust and use data effectively, there must be a clear link between defined standards and the data in reports. Users need confidence that the data is accurate and officially sanctioned; otherwise, it remains underutilized.

The Impact of Untrusted Data

When data is both untimely and untrusted, it is unsurprising that it often goes unused. Ensuring timely and reliable data is essential for making informed decisions and maintaining trust in hospital operations.



3

UNUSED DATA

When data is untimely and untrusted, it is not surprising that it often goes unused. However, it's important to delve deeper into why data remains unused, as there are two main groups of reasons.

Reasons for unused data:

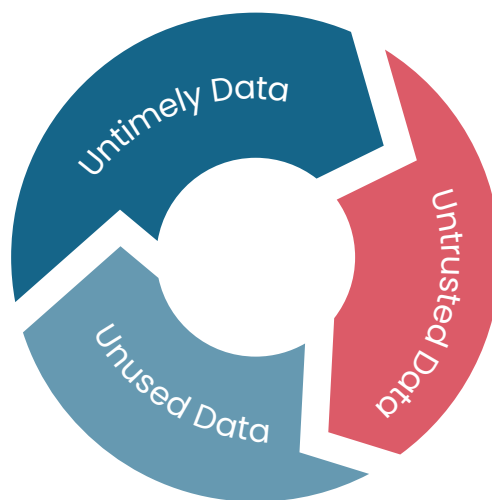
A. Lack of Trust

The first reason is disillusionment with the data's accuracy and trustworthiness. When people can't trust the data, they tend to disregard it and try to figure things out on their own. This mistrust arises from past experiences with unreliable data, leading to a reluctance to rely on available reports.

B. Lack of Discoverability

Users may not know reports exist because data is often not visible or discoverable. BI tools prioritize data security, restricting access to authorized personnel, but this can backfire. If someone who should have access doesn't, they remain unaware of the report, leaving valuable data unused.

The lack of discoverability leads to redundant requests. Users, unaware of existing reports, submit new ones to the BI team, adding to the backlog and worsening the problem of untimely data. These issues are interconnected, perpetuating a **systemic cycle**.



Addressing unused data requires **improving** both the **trustworthiness** and **discoverability** of data. Only by breaking this vicious cycle can hospitals ensure that their data is timely, trusted, and effectively used to enhance decision-making and patient care.



4

SYSTEMATIC SOLUTIONS FOR SYSTEMIC PROBLEMS

Systemic problems require systematic solutions. This entails a layered approach that addresses the strategy, platform, people skills, and processes leveraged by the BI team.

- **1. Strategy:** Business Intelligence is not an end in itself. It is the means to achieve business goals. Therefore, a BI strategy must be developed in a context of the organization's strategy and goals. Defining the right strategy must also account for the current and targeted **enterprise data culture**.
- **2. Platform:** The right BI platform is one that effectively supports a BI strategy, defined in the preceding step the word platform refers to the collection of reporting tools and all related technology solutions designed to produce, distribute and build trust in BI content word platform refers to the collection of reporting tools and all related technology solutions designed to produce, distribute and build trust in BI content.
- **3. People:** The strategy also dictates the mixture of roles needed to carry out the reporting team's mission. This may include business analysts, report developers, data scientists, trainers, etc.
- **4. Processes:** From request management to stakeholder communications, multiple processes must be defined to streamline BI operations. The goal is to eliminate any activities that do not contribute value to the organization.

We invite you to join our **online workshop** and explore how to tackle these different facets with us.



Eureka

MAKING IT EASIER TO USE BI CONTENT



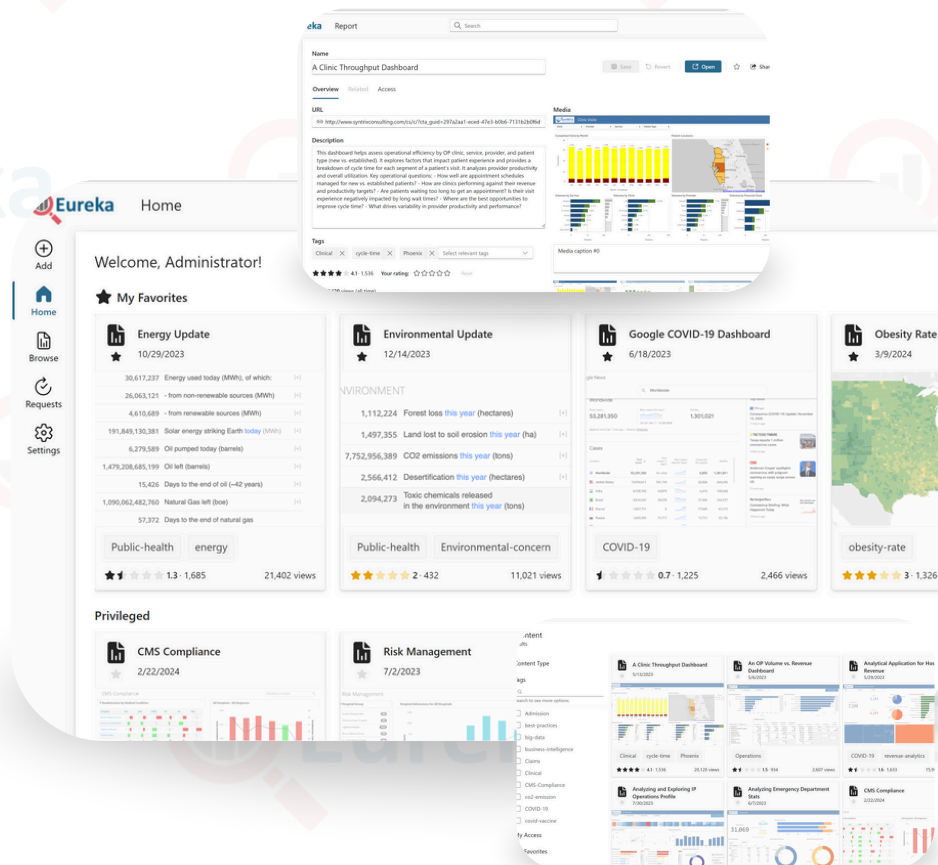
Find: Browse a searchable library of all content, that makes BI discoverability easy.



Trust: Capture meta data that instills confidence in users that they are using the right report for their needs.



Use: Eliminate barriers to report access.





ENHANCE YOUR HEALTHCARE ANALYTICS WITH DATA GOVERNANCE BEST PRACTICES

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