

West Tennessee Healthcare Jackson-Madison

Institution Profile

650 bed Community Hospitals
150,000 Radiology procedures per year
Located between Memphis and Nashville

Interviewed

Lori Patterson, PACS Manager
Ken Hollis, PACS Administrator

Key Success Factors

- Involve everyone early. Participation is key to successful design and buy-in
- Include all physician groups in your planning process
- Educate and train everyone. PACS is not just a radiology system
- Communicate continuously to all groups throughout the process
- Design process changes; set deadlines
- Monitor indicators of success constantly

“ The GE consultant took a completely different approach from other firms. She was one of us - part of our team. She wanted the best for us and wanted us to get the equipment that would most benefit our clinicians, radiologists and technologists. And she kept everyone informed and prepared. She was invaluable to the PACS integration.”

Lori Patterson
PACS Manager



The Site

Jackson-Madison is a 650-bed hospital located between Memphis and Nashville, Tennessee. Though their community is relatively small (50,000), they also serve the majority of patients in the surrounding 17-county area. As a result, they complete over 150,000 radiology procedures annually. In April of 2001, Jackson-Madison opened a dedicated diagnostic imaging center.

“The imaging center really expedited our PACS decision-making process. At the time our equipment was over 15 years old, our workload was increasing, and we had inpatients on top of outpatients. We decided that the new imaging center would be filmless,” said Ken Hollis, PACS Administrator.

With a high number of physicians trying to get films to doctors’ offices, problems with locating jackets, clinicians wanting portable chest films on the floor all day, and tight Medicare windows, PACS held the key to significant improvements in efficiency and productivity for the organization. Improving workflow efficiency also made good financial sense.

Selection Criteria

Key selection criteria for the new PACS system included ease of use for the technologist, fast and simple image viewing for clinicians and physicians, and a company with a strong PACS reputation and exceptional services. “We were looking for a vendor with a total solution, one that we knew would be there 5 years from now, someone who would support us 24 hours a day” said Hollis. Of particular interest to Jackson-Madison was the Active System Management (ASM) feature from GE Medical Systems. Utilizing a persistent link, software agents resident on the subsystems

proactively monitor performance and track critical subsystem performance around the clock.

After working with an independent consultant and evaluating several possible suppliers, the Jackson-Madison team selected GE Medical Systems.

GE Consulting Services

The Jackson-Madison team knew that PACS system selection was just the first step in a successful implementation. That’s why they also selected GE Medical Systems IT Consulting Services to help with change management and process design for their enterprise-wide PACS implementation. The GE Consulting team members bring a unique combination of healthcare industry experience, facilitation and change management skills, and a thorough knowledge of Six Sigma methodology. Working together with the site, they help define and implement solutions geared to each site’s specific needs and objectives.

One of the biggest concerns at Jackson-Madison – their 300+ referring physicians. It was imperative to address their needs, make sure they had plenty of opportunity to provide input and receive training, and most of all, that they actively participate in the implementation.

The GE consultant worked closely with the Jackson-Madison PACS implementation team – reviewing existing processes, asking questions, making modifications, and educating the hospital on what to expect.

“It was as if she had worked here before, knew the workflow, and knew exactly what we needed and why. She was extremely well prepared, honest, and able to communicate with all levels within the hospital,” said Lori Patterson, PACS Manager.

GE Medical Systems
Information Technologies

Consulting Services

Proactive Process Design Using Six Sigma

Define and Measure

Structuring

- Sponsor kick-off
- Constituent interviews

Baseline Measurement

- Report turnaround
- Ref, MD/RN sat.
- Patient satisfaction
- Cost per procedure

Current State Process Maps

- Key referring clinics
- Ancillary services
- Digital modalities
- Process map validation

Analyze and Design

High-Level Design

- PACS open house
- Ref. clinic process design
- Modality process design

Detailed Design

- Ancillary services design
- Transition design
- Future state process maps

Verify

- Process Implementation
- Indicator Re-measurement

“Our GE Consultant was adamant about our getting in touch with the referring physicians. She bent over backwards to meet their needs and to ensure we got them involved. She did a great job. And she increased acceptance from the film room through the referring clinicians, because a PACS implementation is not just a radiology undertaking – it involves everybody.”

*Lori Patterson
PACS Manager*

The Implementation Process at Jackson-Madison

Involve Everyone Early — The change process began by creating the PACS Team, including the GE IT Consultant, PACS Administrator, PACS Manager, PACS Project Manager, CIO and the Vice President. This team was charged with making sure everyone was involved in workflow decisions – from film clerk to orthopedic surgeon.

Include All Physician Groups — The team talked with referring physician groups to understand their current film and report needs and what their expectations were for a “filmless” environment.

Educate And Train Everyone — The PACS Manager and the GE IT Consultant also worked closely with the department directors to ensure the new process would work for them, educating the staff on the new procedures, coordinating training, and immediately resolving any issues that arose.

Communicate Continuously — Brief PACS presentations were made during the Physician Advisory Committee meetings to keep them informed of progress and to gain their support. Monthly newsletters were sent out to all medical staff physicians and hospital nurses.

Design Process Changes/Monitor Constantly — Workflow meetings were held with the modality implementation teams to design a workflow that would meet the radiologists’ and technologists’ exam needs. Armed with an understanding of their pre-PACS workflow, the GE IT Consultant addressed workflow areas directly affected by the PACS system.

Results

As each major implementation phase was successfully completed, the GE Medical Systems IT consultant developed and presented a “Post-PACS” implementation report. Also based on Six Sigma methodologies, this involves analyzing and comparing the Pre-PACS and Post-PACS baseline measurements. Seven months into their PACS system implementation the following results have been achieved at Jackson-Madison.

- Exam Completion to Dictation: Decreased by 65.4%
- Film Expense excluding mammography: Reduced by 80.6%
- Increased employee and referring physician satisfaction

“The Consultant brought the perspective we needed. A whole new perspective that we didn’t understand. That’s mainly why we’ve been as successful as we have been.” Lori Patterson, PACS Manager



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