

Health Information Exchange in Mendocino & Lake Counties

High-Level Strategic Plan (HLSP)

I. Planning process and timetable

ACTION	TIMING	NOTES
1. Preliminary conversations	6/12-16	Susan Baird, Andy Coren, Carl Henning, Will Ross, John Knapp, Greg Wenneson, Allen Briskin
2. June 21 meeting: launch policy & legal deliverable. Distribute HLSP scoping document, invite participation	6/21	Announce 6/30 meeting. RSVP to Tanya Laino
3. Workgroup meeting to outline the HLSP and ID key inputs	6/30, 2:30-4:30	MCDPH, Conference Room 2.
4. Possible survey to gather extended community input	7/1-12	Susan Baird, Will Ross, Phyllis Webb
5. Draft 1 of HLSP to RHIC Steering Committee	7/26	Circulate first working draft
6. Draft 2 to RHIC	8/23	Full discussion of HLSP at August meeting of Steering Committee
7. Final HLSP to RHIC	9/27	

II. Planning workgroup meeting: Friday, June 30, 2:30-4:30 p.m.

(1st ~30 minutes: get acquainted and review the local HIT/HIE landscape, especially the community infrastructure in development by Redwood MedNet.)

Questions for discussion:

1. What are the most important gains to be achieved by regional health information exchange in the next 5-7 years?
2. What core principles underlie these objectives? (see suggested list below)
3. What major steps are needed to achieve these objectives?
4. What people and organizations should contribute to achieving these strategic directions, and what are their motivations?
5. What are the major obstacles to achieving the objectives?
6. Who else needs to contribute to this evolving strategic vision?

Crosscutting topics to be addressed in these discussions:

- Status, distinctions and connections among local HIT/HIE projects; how they interact.
- How to “make bridges” and engage more local health care professionals and their institutions in the HIE
- How to make the HIE relevant to both private and community health.
- What larger community purposes the projects serve or might serve—the wider vision.

III. Proposed contents for final HLSP document (10-15 pages):

- Overall vision statement
- Specific strategic directions: Goals to be achieved through HIT and HIE in Mendocino County (Why do we want HIE?)
- Guiding principles *[examples:]*
 - Enhance quality of care for all residents of Mendocino and Lake Counties
 - Conform to the Connecting for Health Common Framework
 - Privacy and patient-centricity are core values
 - Build HIE that is self-sustaining
 - Size doesn't matter; develop HIE that works at any scale of health care delivery
 - Facilitate the individual and collective practice of medicine
 - Interconnect all participants in the local health care community, including EMS
 - Scalable and adaptable to evolving technology
 - Interoperable; inconsistent with silos
 - Collaborate with regional State and Federal HIT and HIE initiatives
- Action steps in key areas, with key actors and timeframes
- Appendices:
 - List of participants in the HLSP process
 - Thumbnail history of local HIT projects
 - Environmental scan: local region and connections to national dimension

IV. Rough schematic: High-level Strategic Plan for Health Information Exchange in Mendocino & Lake Counties

Strategic objective area	Action step/ key actors/ timeframe	Action step/ key actors/ timeframe	Action step/ key actors/ timeframe	Action step/ key actors/ timeframe
<u>HIT adoption</u> 5-7 year strategic direction:				
<u>Health care professional engagement</u> 5-7 year strategic direction:				
<u>Consumer empowerment</u> 5-7 year strategic direction:				
<u>Community health improvement</u> 5-7 year strategic direction:				
[other areas?]				