

eHealth Care Quality and Patient Safety Board Action Plan Implementation Summit: Evaluation Results

What stakeholder/sector do you consider yourself to most represent?

Stakeholder/sector	Number	Percent
Federal government	3	3.3 %
State government	20	21.7
Local government	3	3.3
Health plan or Insurer	3	3.3
Health care system	15	16.3
Physician practice or clinic	2	2.2
Other health care provider	5	5.4
University/Academic/Research	10	10.9
Patient/Consumer	8	8.7
Other	14	15.2
No answer selected	9	9.8
Total	92	100 %

Other stakeholders listed:
Advocate
Community Pit Activist
Non-profit Health Care Association
Consumer Advocate
Public health consultant (3)
MD Hospital Epidemiologist
Community Public Health Activist
Rural Advocate
Tribes
QIO Government Contractor
Outreach
Health Literacy

Please rate your level of knowledge on the following elements on a scale of 1 (low) to 5 (high):

	Prior to the Forum (Mean)	N	After the Forum (Mean)	N
Role of the eHealth Board and Executive Order 129	3.11	90	4.10	88
National Initiatives in eHealth	3.03	91	4.03	88
WI eHealth Action Plan	3.01	91	3.99	89
WI current eHealth Initiatives	3.05	91	4.05	91
Your role in eHealth and Wisconsin's process	3.01	91	3.71	91

Did you participate in the Action Plan Development process over the past year?

	Number	Percent
Yes	29	31.5 %
No	63	68.5

Do you plan to participate in the Action Planning Process through a workgroup or other means over the next year?

	Number	Percent
Yes	46	50 %
No	7	7.6
Unsure	36	39.1
N/a	3	3.3

Comments: Probably will participate in the implementation process because you need a lot of help on the consumer side.

Has your participation in this event influenced your plans for adopting health information technology in your own organization or participating in regional health information exchange?

	Number	Percent
Yes	41	18.5 %

No	17	44.6
Unsure	8	8.7
N/a	24	26.1
Did not answer	2	2.2 %

Comments: We are committed to participation in this from the start.

Speakers and Panelists: On a scale of 1 (not useful) to 5 (useful), please rate how useful you found the content of the speakers and break-out sessions.

	Mean Rating	Mode Rating	# of Respondents
Kevin Hayden, DHFS Secretary	4.03	4	87
Robert Kolodner, National Coordinator for HIT	3.98	4	86
Jan Marchibroda, eHealth Initiatives	3.70	3	82
Marty La Venture, MN Center for Health Informatics	4.01	4	80
Seth Foldy, MCW and helath.e.volution	4.00	4	74
Breakout Session A: Privacy and Security	3.91	4	23
Breakout Session B: RHIO Development and Governance	3.95	4	30
Breakout Session C: Public Health and Surveillance	4.14	5	22
Breakout Session D: Health Literacy and Consumer Engagement	3.70	3	27
Governor Jim Doyle	3.66	4	71

Comments

General: Good to bring national speakers to show how each state/nation is working together; Maybe only one national speaker and one early panel next time; Speakers were fantastic (3); Great viewpoints and scope.

Seth Foldy: Good interactive time with Foldy panel.

Marty LaVenture: Couldn't hear Marty LaVenture (2), Marty LaVenture didn't really focus on topic

Breakouts: Breakout sessions and reconvergence allowed for a broader scope of the program; Breakouts weren't overly useful-not enough time to discuss topics; Breakout session for public health and surveillance involved too much presentation by the chair and inadequate time for input/perspective from participants (2); Health and Literacy breakout was poorly facilitated; Good discussion at the consumer breakout.

Governor Doyle: Gov. Doyle was nice but nothing new, Gov. Doyle was rated a 10

Please rate the following areas on a scale of 1 (low) to 10 (high):

	Mean Rating	Mode Rating	N
Background Material: usefulness of printed material provided	6.38	8	86
Venue: overall experience with the Fluno Center	9.25	10	92
Registration: experience with ebrochure and online registration	9.25	10	91

Comments

Background Material: Great content; Well executed; Appreciated receiving the entire eHealth action plan; Could have sent out WI eHealth Action plan and WI current eHealth initiatives so we had a chance to look at them so we could have a better listening opportunity; Handouts didn't match presentations (15), Can updated power points be made available on the website?; I was too engaged in the sessions to read the printed material (2); Print materials in larger fonts to be read in dim light in the auditorium; Not all registered attendees received an eHealth Action Plan.

Venue: Bigger venue for the future (4); Lighting could be better in main hall; Meeting should be held on the outskirts of Madison to facilitate travel; Great location; Parking was a problem.

Registration: There should be more seats or attendance should be capped.

Please share other comments about the printed material, speakers, the format of the conference, or suggestions for future eHealth events.

General Comments on the Conference:

- So well done!
- Thank you! (5)
- We're behind you all the way!

- Overall great summit! (3)
- Well organized, informative event. (2)
- Very valuable and important conference.
- Congratulations to the Governor and Board!
- Please post current slides used today (Robert and Janet's) on website.
- Food: Get the Fluno Center to offer Splenda, for a dairy state there should be protein at breakfast (3), food was excellent.
- Have a break in the morning; need a break every 2 hours.
- If we can't get the right info here for meetings, how can we get to health information exchange?
- May be a function of the evolutionary stage of this work, but there was little practical immediate mile home.

Suggestions for Future Event Content and Structure:

- Have a better emphasis on language being used: lots of jargon and acronyms (2), some words are stigmatizing
- Needed a different structure for facilitation; seemed that facilitation didn't really pick up on what participants were saying.
- More specific examples rather than just a high level overview.
- Future events: how do we motivate consumers to care? How do we motivate consumers to improve their health status?
- Could have sent a strong message about a consumer-centric process by featuring people in the program who are identifiable as consumer advocates.
- Examples of value to different types of physicians and examples of values to consumers and examples of other states success rather than Santa Barbara closing.

Suggestions re: Wisconsin's eHealth Initiative:

- Can we as participants be kept up to date throughout the year with progress on e-health, grants, etc?
- Need a broader notification process re eHealth board activities, meetings, opportunities, to all providers in WI (including small, rural, NH, etc.).
- Would like to see subgroup on policy that ties into WMS, WHA and other professional groups.
- Logo should be changed to add consumer interests (as in MN).
- Need more consumer tours in the eHealth initiative.
- More consumer representation on the board.
- Need clear privacy expertise in the project.
- Public health's role needs to be included in the discussion of the action plan.
- This process seems to be too heavily provider influenced and focused.
- It seems we need input from younger and older people.
- Need to build culture to shift from what you are doing to me to what are you doing for me (e.g. opt out, public health benefit).

Consumers' Role in the eHealth Initiative.

- As a consumer, I was not convinced that my right to privacy will be respected, especially by insurance companies.
- Need to have eHealth for Consumer meeting on a regional basis.
- When policy professionals, clinicians, and industry leaders put on their "consumer" hat, they are still NOT typical consumers, do they acknowledge this limitation?
- Disagree with Betsy A saying morning session didn't include a consumer perspective.
- Apparently, privacy is the only consumer concern being addressed.
- Disagree cost and quality are consumer issues, not just perspectives of self proclaimed consumer advocates.

Miscellaneous

- I'm interested in the standards of data regarding IT.
- There is an assumption that HIE will feed to improve quality of care- is there any research to support this?
- Insufficient focus on rural challenges; our emphasis that only progress by "systems."
- Best quote of the day: "culture eats strategy for lunch!"
- How will the efforts discussed today address health plan concerns about permissibility of sharing PHI/IIHI with RHIO/WHIO organizations for quality and cost tracking?
- Right now we believe we can only share de-identified information not individually identifiable health info, will that change?
- If I could serve in any manner, please contact: Claude Rochon RN (608) 628-2600, LittleKidzNurse@hotmail.com.
- So glad there is a lot of energy about this topic.
- Looking forward to learning more as things progress.