

The healthcare industry is becoming firmly planted in the digital age and as such, technology should be a tool to enhance clinical communication and workflows, not hinder them. Health systems will enjoy the biggest return on their investment if they employ the same discipline the most innovative systems across the country use when vetting a clinical communication partner.

According to a survey of 150 innovative healthcare leaders, the trend putting the most strain on clinical communication is an increase in the number of communication devices and systems, closely followed by an increase in government regulations and outdated technologies. So how do innovative health systems find the right Clinical Communication Platform™ (CCP)? It starts with the RFI/RFP process.

Read [Understanding Purchasing Strategies for Clinical Communications Solutions](#)

### PLANNING

Lay a solid foundation of people and processes and allow for ample time to plan the project. Set the expectation that your Selection Steering Committee (a combination of nursing, physician, and IT leaders) will need to be involved for the duration of the process. Be sure to review other systemwide initiatives that could compliment or compete with the CCP project to avoid unnecessarily straining personnel if possible. Layout your milestones:

- Develop an RFI based on your system’s requirements
- Review and determine if an RFP is needed; if yes, socialize to RFI respondents for completion
- Advance 2 – 3 vendors for onsite activities (includes presentations and assessments)
- Complete reference site visit
- Decision

Remember, it’s more important to make the *right* decision rather than a quick one. Don’t be a health system that adds another technology to the IT graveyard.

Read [Collaboration Starts with the Executive Team](#)

### RFI FIRST!

With an internal plan in place, it’s time to engage the vendors. Going straight to an RFP misses the mark in two main areas. First, you don’t know what you don’t know. CCP is a brand new, burgeoning space. Inevitably, there will be areas overlooked for health systems writing their own questions without insight into product capabilities from vendors. Second, there is always room for interpretation. Even with an open Q-A period prior to the RFP submission, vendors interpret questions to their product’s functionality. This can play to your advantage!

An RFI provides health systems with:

**Insight into how the partner will operate.** While an RFI does not require the same rigidity in the initial questioning, you will still provide guidelines for the information you expect returned. How the information is presented back to you will speak volumes about the vendor: Is the material fully developed? Organized? Clearly articulated? Well documented? This first round of information is a snapshot of other assets the vendor offers.

**Understanding of the company’s philosophies.** Is the vendor a healthcare provider? Do they play in spaces other than healthcare? How do they approach a deployment of a clinical communication platform? How do they approach an implementation? Importantly, when reviewing the RFI, does the information align with your health system’s objectives and does the vendor seem like a good partner?



**Visibility to real technology.** Cut through the vaporware - nobody wants to be the beta (unless they sign up for it). An RFI is more open-ended than an RFP, where a vendor can hide behind a “yes” answer that may really translate to “yes, in beta form”. In an RFI, the vendor highlights its *true functionality*, rather than leaving it to interpretation, and you decide if it’s the right fit.

### DECISIONS, DECISIONS

Once the RFI submissions are in, it’s decision time. The Steering Committee can begin vetting the RFIs with the initially defined criteria and identify the compelling pieces of product functionality and services that vendors offer. From here, the committee may decide they need to move to a quasi-RFP (let’s call it a survey). That is, the committee may need to see the top three or four vendors head-to-head in specific areas. However, to avoid the common pitfalls associated with an RFP, the next step after the survey is to select the top two or three vendors and invite them onsite for the next round.

### ONSITE ACTIVITIES

Remember, you’re selecting mission-critical technology that touches each of your clinical users as it supports a patient’s continuum of care, which is no small feat and no small investment. Getting the first glimpse of what a partnership with the vendor looks like begins with the onsite activities. When hiring a new executive, is a 60-minute interview enough to confidently make your choice? Likely not. Similarly, a 60-minute presentation won’t give you the insight you need to judge the aptitude of the CCP vendor. In addition to a presentation, offer vendors a half day (or more, depending on the size of your system) to tour and conduct clinical and technical assessments of your facilities. You’ll learn a lot about the vendor during these onsite activities and your employees can assess the team who will be working with them during this process.

### REFERENCE SITE VISIT

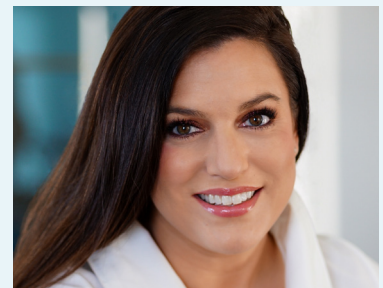
Similar to the EHR purchasing process, CCP vendors should offer Reference Site Visits instead of calls. With Reference Calls, you can be sure that vendors will choose customers who are happy and customers who (typically) want to help vendors. However, with a Site Visit, health systems gain firsthand experience of the product in action, discussions with everyday users, and a look at the vendor’s partner community.

Also critical during this point is to question the Reference Site about the deployment: what was the implementation? What worked well? What were important lessons learned? These are items to review with the vendors after the Site Visit to streamline and devise the best plan for a Clinical Communication Platform™ implementation.

### CONCLUSION

While most systems may be inclined to follow an RFP process, consider the following scenario. After an intense and time-consuming RFP process - one that included a robust list of technical, clinical, and security questions; an onsite demonstration from vendors; and a round of reference calls- a health system excitedly declares its winning vendor. When the rubber meets the road is when health systems fall prey to the RFP: the implementation has never been completed on a large scale, the product does not function as advertised, and the ROI is nonexistent. By foregoing an RFP and instead utilizing an RFI and applying the ideas proposed here, you will choose the right CCP partner and improve your clinical and technical ROI.

Read [The Road Less Traveled: Buyer Journey vs. Customer Journey](#)



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Liz is responsible for sales operations strategy, sales enablement, and facilitating the customer journey through sales into implementation. She is enthusiastic about the possibilities presented by technology in creating a better healthcare experience for practitioners and patients.