

# **Nikkei Concerns: Information System Analysis and Implementation Case History**

## **Overview - August 2008**

Nikkei Concerns is a provider of elder care services located in Seattle, Washington. The facilities consist of approximately 150 skilled nursing beds and 50 assisted living units. The organization also serves about 30 people in adult day care and over 500 in the continuing education program. While a seemingly small organization by some long-term healthcare facility standards, the complexity of operations lay beneath the surface waiting to be discovered.

When Nikkei Concerns contacted K2HealthTech in August of 2008 the staff responsible for tracking the residents and gathering information on the residents' financial and medical conditions were doing so using a variety of computerized and manual processes that were not as integrated or coordinated as they could be. Duplication of information was present and information was not shared as readily as it could be.

Nikkei Concerns recognized that problems existed with these information systems and related processes and they requested an analysis be performed during the month of September 2008 to facilitate their acquisition and implementation of a new primary information system by December 31, 2008.

## **Plan**

K2HealthTech proposed a plan to:

1. Review all computerized applications both commercial and "home-grown".
2. Review major manual operations that could be computerized.
3. Review the notification and communication processes in the organization.

## **Results**

This analysis resulted in creation of:

1. A document describing the various methods of gathering data, producing management reports and forms of communication both internally and externally.
2. Recommendations for modification and/or automation of processes to increase efficiency.

The outcome of this analysis was:

1. A complete and easy to understand description and view of the business practices and information flow in the facility that facilitates training of new staff, improvement of existing practices and identifies areas to potentially be automated.

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2. The identification of gaps in the information system processes, both computerized and manual, which provided a guide for the information system selection process by providing a greater level of detail necessary to assist facility staff and system vendors in properly selecting and installing the best information system solution for the facility.
3. Furthermore, it created an inventory of data that could be converted from the old information system to the new information system using automated methods to smooth the transition to the new system, greatly accelerating the implementation process and ensuring accuracy of the information in the new system.

### **Conclusion of Initial Analysis – October 2008**

Based on a detailed analysis and review K2HealthTech discovered issues beyond resolution by the mere replacement of the old computer system with a new computer system. What was recognized was that fundamental deficiencies existed that should be corrected prior to the system selection, acquisition, and implementation of a new computer system. Putting a new system in place while these deficiencies existed would not have corrected the deficiencies and may have jeopardized the success of the system replacement project. As a result of these recommendations Nikkei Concerns wisely decided to defer the implementation project until the time they were truly prepared to complete the project successfully.

### **Status - August 2009**

Over the course of the intervening ten months since K2HealthTech's analysis report was presented the staff at Nikkei Concerns worked diligently and had reconciled many of the issues that existed with managing their formerly problematic information system flows. They had now made the decision to acquire a new primary information system and were prepared to implement the new system. Their goal was to have the system fully operational by the beginning of January 2010. Recognizing that time was short (only four months) to perform the transition to the new system efficiently and accurately within this limited timeframe they contacted K2HealthTech to perform a data transition project where much of the critical and voluminous data would be exported from the old computer systems, converted to a new format compatible with the new system and imported into the new computer systems database.

Concurrent with the implementation of the new computerized information system the financial staff of Nikkei Concerns planned to reorganize and streamline their business practices and accounting structure for increased efficiency and to provide greater business insight. A completely new chart of accounts would be developed to serve as

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the financial “backbone” of their system so as to allow them to more clearly manage their financial operations.

Beginning in September, 2009, K2HealthTech established a relationship with the new software system vendor, Keane Care, and obtained detailed record layouts and requirements for importing the data. They obtained access to the old system and the tools to be used to export the existing data. K2HealthTech also obtained access to the new system and the tools to be used to import it into the new system. Pertinent data was exported from the old system as well as sample data being exported from the new system. K2HealthTech then began the detailed process of converting the old data into the required import formats and verifying its completeness and accuracy.

### **The Chronology of the Data Conversion Engagement**

- 2009\_09\_03: K2HealthTech was contacted by Susan Oki, CEO, of Nikkei Concerns regarding help converting data into their new KeaneCare system. K2HealthTech begins the process of getting system access and import files specifications and starts analyzing the data that can be exported from the old systems. Training was to begin in November. Work begins on the chart of accounts cross reference file.
- 2009\_10\_13: Nikkei Concerns informs K2HealthTech that Keane Care’s business system implementation consultant now advises splitting the single general ledger into two separate general ledgers. The chart of accounts cross reference file will need to map this out and all general ledger data will need to be split with one general ledger containing data from two of the existing business units and another general ledger containing data from the other five business entities.
- 2009\_11\_16: Physician orders time code, order code and order type cross reference files are completed. K2HealthTech imports 5369 resident physician orders for 147 residents into the Keane NetSolutions database. This task alone saved Nikkei Concerns well over 100 hours re-keying physician orders and ensured the review process would find few if any errors as data was converted on a character-per-character basis and not subject to human error. This is invaluable when it comes to medication dosages as a mistake could be very serious.
- 2009\_11\_28: K2HealthTech imports 741 chart of account codes, 65 department codes and 1311 vendor names and address into the KeaneCare database. Many old account numbers which were five digits were combined and realigned to use a seven digit account numbering scheme.
- 2009\_12\_05: K2HealthTech imports 17,754 weekly weight records for 151 currently active residents. This will allow Nikkei Concerns to maintain all resident

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weight trending information for all the current residents going back the day of the original admission and report on it using the new computer system. Manually entering this information would not have been practical.

- 2009\_12\_14: K2HealthTech imports Payroll Employee Records: 48 employees for facility 001 and 214 employees for facility 002. This conversion's most valuable features included ensuring direct deposit bank account information and employee social security numbers were 100% accurate. Manual entry would have created too much risk of transposing numbers resulting in failed direct deposits and potentially incorrect W2 reporting in 2011.
- 2010\_01\_09: K2HealthTech imports 118 GL balances and 42,064 GL detail transactions for facilities 001 and 002. This will allow Nikkei Concerns to process the entire 2009 fiscal year using the new system. Furthermore Nikkei Concerns will be able to perform prior year comparison reporting during their first year actually using the new system. There was no reasonable option for manually entering this information in the new system.
- 2010\_01\_18: K2HealthTech imports 76 GL Budget items and 143 GL Budget items for facilities 001 and 002. This will allow Nikkei Concerns to process the entire 2009 fiscal year budget reports using the new system.
- 2010\_01\_18: K2HealthTech creates a 190 line journal entry to reverse and repost entries misapplied in the conversion due to incorrect GL cross reference file entries. Errors can occur due to improper setups, but automated conversion processes are easily adaptable for fix the errors.

### **Summary**

By utilizing the automated data conversion services of K2HealthTech, Nikkei Concerns was able to save hundreds of hours manually entering their data into the new system. They also avoided the potential for data transposition that could have resulted in serious problems. By embracing a computerized data transition strategy to migrate their old data to the new system they were able to get their new system up and running in record time and helped ensure the success of their new system implementation project.

Using the data conversion process they were also able to create greater functionality from the first days they began using the system. They will be able to perform historical reporting functions immediately instead of having to build the history all from scratch in the new system. Without data conversion this benefit would simply have not been possible.

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### **Testimonial**

Here is what Skip McDonald, Nikkei Concerns CEO and Administrator had to say about the data conversion services provided by K2HealthTech:

#### **2009\_12\_02:**

Thanks for all of the excellent technical assistance rendered in connection with our conversion to Keane NetSolutions. All seemed to go well, and we are making good progress daily. We would not have been able to have done it without you.

#### **2010\_01\_19:**

Thanks for all of your help with this project. We would not have been as far along without your help! I know that Sara and Cheryl appreciate all that you have done for them. We do appreciate your creativity and perseverance in completing this most important project.

As you might imagine, we are still tweaking some of the set up and configuration parameters to our satisfaction. Still, we have finally been able to submit and receive payments for our own Medicare and Medicaid claims. Unbelievable!!

### **Conclusion**

Implementing a new information system is never an easy task and the risk of failure is very high. Good project planning and management are essential to ensuring success of the project. Automating the otherwise tedious and error-prone data entry task to use a computerized data conversion increases the chance of success almost beyond measure.

A precise data conversion allows the facility's staff to spend their valuable time fully learning to completely utilize the new system and avoid mundane repetitive data entry. Many software vendors consider the data entry task to be "training." The reality is once someone enters a few vendor records or enters a few physician orders they ARE trained. They should not have to spend seemingly endless days keying in the same kind of data over and over again. By using an automated data conversion service the business office and clinical staff can focus on the aspects of training related to business and clinical intelligence. They can use their new information system to work smarter instead of working harder. Nikkei Concerns made the right choice. They analyzed and acted based on the analysis. They followed through and then planned before they executed their project. They are now well prepared to start the new year with their new information system in place helping them immediately manage the complex financial and clinical needs of their nursing home, assisted living and their other senior care business needs.