## Stakeholder, Goals, Objectives\*

\*This worksheet was adapted from a 2011 book published by the Healthcare Information and Management Systems Society (HIMSS) entitled "Improving Outcomes with Clinical Decision Support: An Implementer's Guide, Second Edition."

This worksheet is used to document your discussions with stakeholders about their priority clinical goals and objectives. Careful attention to **all** key stakeholders cannot be overemphasized. List each stakeholder in the first column.

In the next column, indicate the role that this person or group will play in the CDS program. You should also note whether they are a potential champion or resistor/detractor for addressing a particular goal or objective (that you will list in the next columns) with CDS interventions, and whether they might play a key role in obtaining resources or funding. If you are detractor or resistor, add principle concern or objection.

In the third column, list the high level clinical goals that emerged from your discussions as important to this person or committee. These goals define broad care processes or outcomes that you will address with CDS interventions..

In the fourth column, break down the goals you have elicited into their component clinical objectives. The more specific and quantifiable you make these objectives, the more likely you will be to devise interventions that produce measurable results. For example, an objective such as "improve prescribing practices for heparin" will likely be less useful than a more specific one, such as "decrease incidence of heparin overdose."

**Example 1: Focused Program** 

Stakeholder(s)	Role	High level clinical	Clinical objectives
(title)		goals	
Melinda B.	Proponent,	Anticoagulant	Improve subcutaneous heparin
(Chief Medical Officer)	clinical	safety	prophylaxis for post-surgical
	thought		patients
	leader;		
	budget owner		

Stakeholder(s)	Role	High level clinical	Clinical objectives
(title)		goals	
John A.	Proponent,	Anticoagulant	Reduce bleeding
(Chief Nursing Officer)	clinical	safety	complications in the
	thought		cardiology areas
	leader		Improve checking of partial
			thromboplastin time (PTT) in
			patients on intravenous (IV)
			heparin
			Improve checking of CBC in
			patients on IV heparin
			Improve compliance with care
			guideline for when to choose
			subcutaneous heparin versus
			low molecular weight heparin

## Example 2: Comprehensive Program

Stakeholder(s)	Role in CDS	High level goals	Clinical objectives
	program		
James C.	Proponent,	Disease-specific	Improve checking of urinary
(Chief Quality Officer)	general	prevention	protein and eye exams in
	quality leader	(outpatient)	diabetics.
			Improve prescription patterns
			for asthmatics on inhaled
			steroids
		Antibiotic	Improve compliance with antibiotic
		utilization	prescriptions based on culture data
		(inpatient)	

Stakeholder(s)	Role in CDS	High level goals	Clinical objectives
	program		
Claire D.	Detractor	Accuracy of	Improve likelihood of advanced
(Chief Nursing Officer)	Concern =	nursing	directives being reviewed with
	potential	documentation	patients
	increased		Improve accuracy of allergy
	workload for		documentation
	nurses		
Ken V.	Proponent,	Ventilator	Reduce number of patients
(Director of ICU)	clinical	management	receiving paralytics
	thought		Reduce ventilator-associated lung
	leader		injuries
		Management of	Reduce use of high dose
		pressors for blood	norepinephrine as opposed to
		pressure support.	multiple pressors
Eric E.	Proponent,	Management of	Decrease likelihood of high dose
(Director of Oncology	clinical	patients in bone	chemotherapy being started too
Service)	thought	marrow unit.	late after admission
	leader		Reduce vancomycin over-utilization
			in patients with neutropenic fever

## Step 2: Synthesize and validate a working list of CDS goals, and clinical goals and objectives for your CDS program. Define baseline and target performance for the clinical objectives.

The analysis of current and potential clinical goals within your organization provides the foundation for synthesizing and prioritizing the CDS program goals. Prioritizing can be important if limited resources or other factors tightly constrain the number of issues that the CDS program can contemplate at one time. It might be useful to first begin developing detailed clinical goals and objectives for the CDS goals and focus areas that are expected to be of greatest importance to your organization.