The 10 Myths of Data Migration in Healthcare
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Introduction

Data migration in a nutshell is the process of translating data from one digital format to another. Simple enough, until you consider the critical role that task plays in the continuing evolution of healthcare into an analytics driven industry. Successful data migration is the linchpin for ensuring that accurate, timely and quality data become the foundation for the digital healthcare enterprise, whether in the form of EHRs, CPOE or PACS. This drives continuity of care for patients. Access to accurate clinically relevant healthcare information is imperative for quality of care.

In this sense, data migration takes the profoundly important concept of integration in healthcare and extends it into the future as hospitals and health systems themselves migrate into lean and efficient operations. That’s why—while it may not be a household term outside of the CIO suite—a basic understanding of data migration is crucial to your overall effort at becoming a high performance organization. At Secant Healthcare we’ve discovered in working with clients that a first step in that understanding is to discard the fuzzy thinking around data migration, which we’ve distilled into the following 10 myths. We hope our answers help clarify why data migration, when performed correctly, can be done with the confidence that your IT initiatives are truly sound investments in your organization’s future.

Myth 1

It will take months to migrate the data.

Many organizations face long data migration projects that take many months to complete for primarily two reasons: poor project management and poor technology planning. But, it doesn’t have to be that way. Secant Healthcare assigns a team of data migration specialists with years of experience in medical data migration and a project manager to every data migration project. In fact, our data migration teams have years of experience and have helped migrate hundreds of terabytes of data for many customers.

In the area of technology planning, Secant Healthcare’s strategy of pulling data directly from the legacy archives storage sub-systems by decoding the archive storage process allows for rapid and efficient data extracts. Utilizing such approaches as a linear process of tape reading allows Secant Healthcare to pull all the data from one tape in one reading at the fastest possible speed. In addition, Secant Healthcare’s proven technology allows for the automated correction of nearly identical records eliminating 20-50% of the manual reconciliation effort.

Myth 2

The data migration process requires continuous monitoring, exception handling and human intervention by the client.

Clients often believe they will be saddled with large amounts of hands-on work during a data migration effort. Secant Healthcare’s technology, however, incorporates remote monitoring capability by Secant Healthcare resources to eliminate that burden altogether for the client. A highly skilled project manager is actively involved throughout the project to ensure that issues are quickly identified and resolved, and the expected migration timeframe is attained.
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Myth 3
If we have problems with the process, it’s difficult to go back.

Secant Healthcare’s Data Certainty™ Solution does not modify or otherwise alter the original exams on the legacy archive. The solution takes a copy of the exam, corrects any discrepancies, place a copy of the original uncorrected data in the exam and forwards the corrected exam to the target PACS or archive. This allows for access and review of the original, uncorrected data elements for the life of the exam.

Myth 4
Data migration will slow both the performance of my new PACS and the ability to access images and data from my legacy PACS as well as drain network resources generally.

Data migration can be highly demanding on both legacy and target systems and it’s understandable that clients believe the process, which involves transmission of large amounts of data over the network, will require a lot of resources and ultimately result in clogging that network. However, Secant Healthcare’s approach reduces the strain on all of these systems. Through careful preplanning, we identify the organization’s peak performance hours and we configure the data migration flow accordingly, modulating it on a steady 24x7 stream or throttling back at those peak hours. The Secant Healthcare Data Certainty™ Solution actively monitors the movement of data and can adjust exam movement on the fly.

Myth 5
“We have to migrate all the data at once and validate the migration before you can start using the data.”

Not true. Secant Healthcare applies intelligence to the migration process in a way that eliminates an all-or-nothing approach. The Secant Healthcare technology allows creation of a routing list that prioritizes data according to what should be migrated first, a form of “pre-fetching”. Using this “pre-fetching” technique, it’s not necessary for clinicians to wait for critically needed data at the time of need.

Myth 6
The data we migrate may have errors and exceptions that will slow workflow, create PACS administration challenges and otherwise interrupt patient care.

Unfortunately, many organizations face workflow and productivity issues when data migration is treated as a plug-and-play solution. The reality: organizations must evaluate the data integrity of medical records prior to moving a single bit of information, rather than trying to do so reactively after the migration has occurred, which disrupts workflow and productivity. Addressing data integrity “on-the-fly” is one of the worst approaches any organization can attempt and sure way to ensure a suboptimal result. Secant Healthcare’s approach never loses sight of the goal of creating client value. Through our Data Endurance™ Solution we are able to tell clients exactly how much data they’re likely to have problems with as well as a robust on-line QA Tool to address discrepancies before the migration begins.
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Myth 7
You need to validate, adjust and tune migration schemes throughout the process.

Secant Healthcare’s proven technology identifies all the exams that can be moved from the legacy to target PACS prior to initiation of the migration process. All exams are identified, analyzed and then matched with the original orders. Knowing the exams that can be moved without issue, identifying records that need special consideration and paying attention to data that may have reconciliation challenges, allows for intelligent planning and negates the need for continuous adjustment throughout the project.

Myth 8
Data migration is a serial process and can only move as fast as my legacy PACS can deliver images to workstations.

Conventional data migration strategies have always been viewed as a serial process, sending one study right after another. Like cars traveling along a rural two lane blacktop, you could only go as fast as the slowest moving vehicle ahead of you in the queue. While this has been the case with legacy data migration solutions, Secant Healthcare has designed a multi-threaded approach that allows the transmission of multiple studies simultaneously.

Myth 9
I need the cooperation of my legacy PACS vendor to do this right.

While it always helps to have the help of your PACS vendor in a data migration, it’s not always possible and ultimately is not necessary. Using Secant Healthcare’s Data Certainty™ Solution, it’s possible to extract data directly from an archive and leapfrog the PACS vendor altogether.

Myth 10
Most records with data integrity issues cannot be migrated.

Data or exams that are inaccessible due to mechanical or software issues—such as a broken tape or corrupted disk drive—may not be able to be moved or are too costly to repair; all accessible data can be moved. The Secant Healthcare Data Endurance™ Solution allows identification of all the accessible data and establishes the data reconciliation success rate before the first exam is migrated. However, data not easily corrected or requiring extensive research for identification can still be moved to the target system and placed in a “reconciliation” folder for future or continued corrective action. In addition, Secant Healthcare’s technology allows for the automated correction of nearly identical records eliminating 20-50% of the manual reconciliation effort.