

Peer's HCIT Adoption and Optimization Methodology

Article 2: Process: The Importance of Clinical Workflow in Technology Projects

Understanding the current environment and current workflows is the foundational activity of all performance improvement methodologies. Six-Sigma, LEAN, Change Acceleration Process (CAP) and Workout are all data-driven methodologies that include current state workflow analysis and mapping, user involvement and a clear statement of objectives that incorporates alignment with organizational goals and projected benefits.

Peer Consulting recently conducted a clinical current state analysis and workflow mapping engagement for a multi-facility healthcare organization which had not previously had strong clinical operations involvement in IT projects.

Overall the engagement had the following objectives:

- Observe clinical activities at selected nursing units and map current state workflows with focus on computer interaction
- Provide the “voice of the customer” to the IT team and project sponsors, identifying improvement opportunities and where technology was not supportive of clinical workflow
- Mentor IT staff on how to perform current state analysis and workflow mapping, improving clinical/IT engagement

Background:

Our client traditionally approached technology initiatives as IT-driven projects, with minimal operational involvement in planning and design. Recent organizational leadership changes, both at the executive level and within IT, have brought a focus on leveraging LEAN methodologies for process improvement and technology projects. As a proof of concept, Peer Consulting represented the IT team and worked with the Clinical Informaticists (CIs) to engage with clinical users to observe and map current state workflows on selected nursing units as a component of an existing IT initiative. Our client asked Peer Consulting to perform this work not only to lay the foundation for a sound organizational change management approach to this particular technology project, but also to coach and mentor the CIs in how to involve clinicians in future technology projects.

Project Approach:

Planning and organizing: Initial planning activities ensured that a combined team of IT representatives, the CI team, clinicians and consultants were involved. The IT project manager provided the context and details of the IT initiative underway. The CIs acted as liaisons to the nursing units and the consultants provided the suggested approach and methodology for the workflow observations. The joint team developed the project plan, the visit schedule and the initial draft of the messaging that would be used to inform hospital staff on the initiative’s “what, how and why” as well as its projected benefits. In short, the team developed an “elevator speech” for use with clinical staff.

The project team visited each selected unit during the planning activities. During these brief visits, consultants toured each nursing station, met unit management and its available staff and discussed the IT initiative, its associated benefits, the workflow observation approach, and any concerns related to the on-site activities.

Workflow Observations: Peer consultants led the workflow observation and analysis activities. The CIs and the consultants began the observations at nursing shift change. Roles observed included nurses, clinical nursing assistants, unit coordinators, and physicians, and the team observed all activities for each role. Observations included a brief description of the activity along with how and where it was performed, noting any variations among caregivers in the same role.

During the observations, staff were very open to the observers and provided a great deal of useful information above and beyond the specific initiative that brought us to the workplace. They reported issues related to specific applications, device placement and utilization, difficulties with logging in, duplicate documentation and they suggested opportunities for workflow improvements. All issues observed or presented by staff were recorded. Those items that were beyond the scope of the current initiative were noted and placed on a parking lot list for future consideration, resulting in users who felt heard and hopeful that their concerns would be addressed.

We observed each unit during the day shift over a 2-3 day period, preparing activity-based workflow maps and reviewing them with the manager of the observed nursing unit for accuracy. Once the workflow maps were completed, we conducted a detailed report-out with the joint project team.

Summary Report: After mapping the workflows for each nursing unit and creating any supporting documentation, Peer Consulting prepared a consolidated report, identifying and listing high impact issues associated with the initiative. We grouped out-of-scope issues by the following categories: system (EMR), device location and utilization, security, workflow opportunity, etc., noting where similar issues were found at multiple locations.

Peer Consulting suggested key follow-up activities and next-steps, including:

- Continue current state observations and mapping on additional nursing units
- Conduct additional evaluation of device utilization and placement
- Utilize the existing maps as templates for future state design
- Identify, select and measure key performance indicators as project success criteria

Conclusion:

The current state assessment, workflow map and accompanying documentation alerted the IT team to high impact issues that required more detailed examination and mitigation prior to implementation of the current initiative.

Messaging materials, such as the elevator speech and a pictorial of the current IT initiative, were refined throughout the project, providing consistent information regarding the project and benefits. We delivered a messaging template that can be modified for specific audiences or updated for future projects. Clinical staff felt heard and involved in this technology project that directly impacts their workflow.

Peer Consulting mentored IT staff and transferred knowledge throughout the project. During the observation period, the CIs observed the consultants during the information gathering / data collection process. Tools and techniques were discussed throughout. Also, during the weekly and summary report-outs, we allocated time to review tools, techniques and to address associated questions. All materials developed during the engagement were provided to the joint team for follow-up activities and as potential template for future projects.

Engaging the user community in this particular technology project proved that their involvement and engagement would make the technology deployment less painful, more acceptable and would actually resolve current issues. The managers and staff on the involved units indicated that our presence and observations were unobtrusive and provided the added benefit of creating a forum for them to present out-of-scope issues for future consideration. Buy-In was achieved and staff looked forward to continuing their participation in follow-up activities such as future state design.