
Operational readiness playbook: A go-to approach to control chaos

Received: 25th October, 2018



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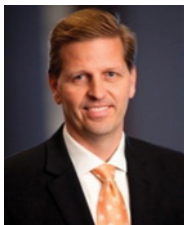
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Abstract As project leaders plan large, transformational initiatives, impacted departmental leaders are often forgotten. Operational leaders are in need of a practical, concise guide to prepare for project activities and allocate resources. The Plummer Project change management team of Mayo Clinic created a single source of timelines and tasks with links to more detailed information, termed a 'playbook' for operational leaders. The tool was dynamic and provided the operations-relevant project timeline, required preparedness activities and essential references. This paper analyses the format and content of this playbook to assist other organisations with the execution of complex projects. The playbook provided clarity, efficiency and cohesiveness with deep benefits to the project team and organisation.

KEYWORDS: playbook, change management, leadership engagement, leading change

BACKGROUND

In 2015, the Plummer Project — named after legendary physician, systems engineer and medical record innovator Henry Plummer — was initiated to converge Mayo Clinic's practice under one integrated electronic health record (EHR) and revenue cycle management (RCM) system. It is the largest project in Mayo Clinic's 150-year history (Figure 1). A team of over 460 Mayo Clinic staff, Epic

staff, external consultants and contractors undertook the mission to inform and convert over 52,000 end users in 98 clinical sites across three time zones. Nearly 300 legacy systems were replaced or eliminated as part of this project. The goal of this project was to benefit patients through multiple mechanisms, including care and process convergence on best practices, expanded online and mobile services and a converged, consistent billing platform.

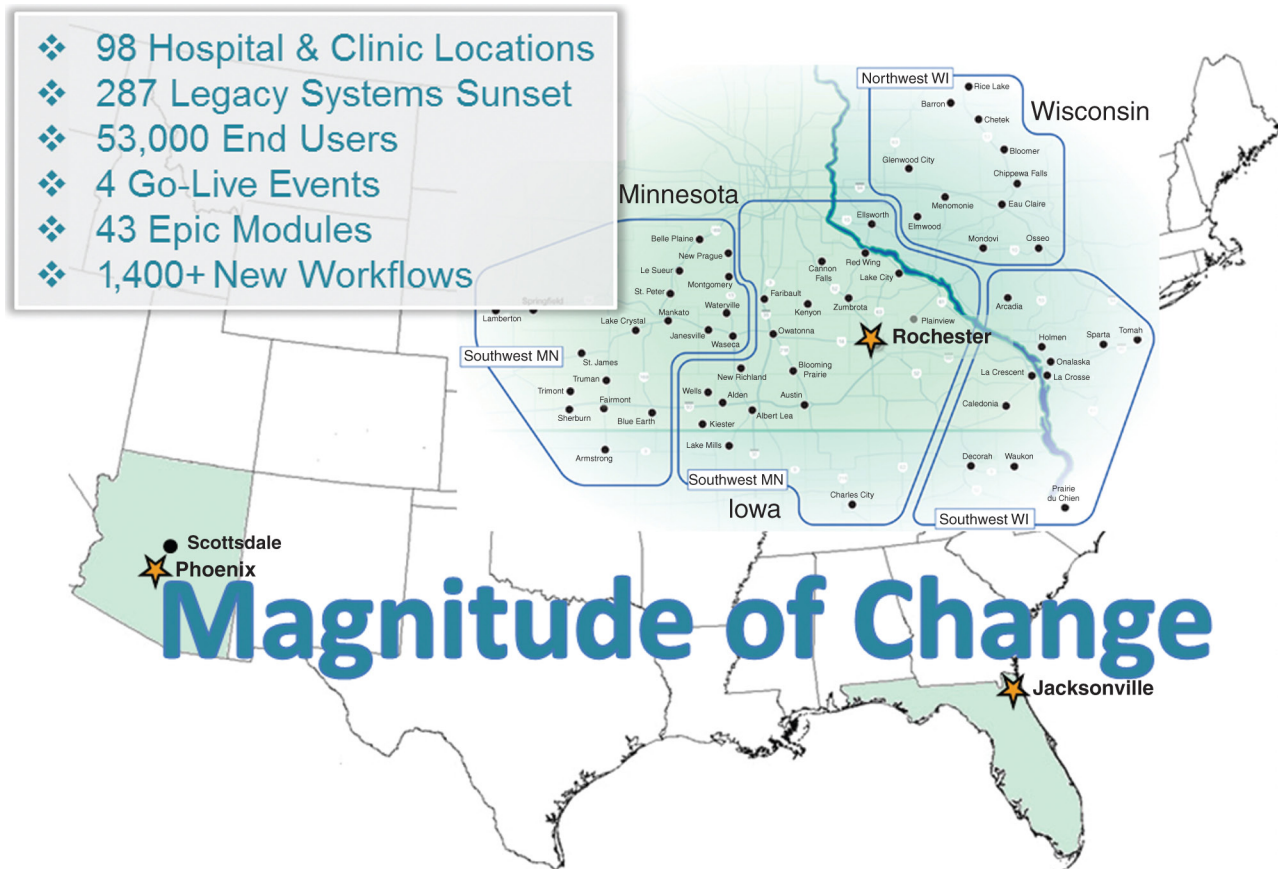


Figure 1: Magnitude of change

Moving to a single platform also facilitated the rapid dissemination of new medical knowledge to benefit patients.

What motivated the leaders of Mayo Clinic to disrupt their current practice and converge to common workflows? ‘The needs of the patient come first’, as this is the primary value and driving force behind all decisions made at Mayo Clinic. It was understood that the convergence efforts of this project would align with Mayo Clinic’s strategic direction towards 2030 and beyond. Patients would benefit from a single-instance medical record with patient-centred billing and online features. Converged processes and a single EHR/RCM system would enable the adoption of best practices from care teams across the Mayo Clinic enterprise for consistent and optimal patient

care. The Plummer Project was unique in that it was designed as a convergence project to be owned by the practice rather than the typical information technology (IT)-led structure of most EHR implementations. Two physicians and a practice administrator led the way. They reported progress through the Mayo Clinic leadership organisational structure. The effort spanned more than four years with four distinct implementations. Owing to the massive size and scope of this project, a formal change management strategy was adopted and dedicated change management resources added to the project team to inform employees about what would likely be the biggest change in their careers. The foundation of the change management strategy included the following:

- Change management tactics and messaging were crafted to ensure successful and quicker adoption.
- Change management networks were created to engage front-line staff and ensure that important messages and information were effectively cascaded to all impacted roles.
- Operational practice owners were engaged early and often to actively support project activities within the scope of their normal day-to-day leadership role responsibilities.
- Various engagement activities were crafted to help users prepare for change.

At Mayo Clinic, the common change management methodology used is ADKAR which originates from the Prosci Practitioner eToolkit.¹ As with other change management methods, the eToolkit guided the team in developing the framework to move end users along the continuum of awareness, desire, knowledge, ability and reinforcement, from acceptance to proficiency over the course of time. Within this structure, leadership engagement is cited as a critical element. As described by Torossian,² 'Healthcare leaders must develop skills not just to manage change, but more importantly to lead change.' At Mayo Clinic, leading change is considered a core competency for all leadership positions, yet leading change can prove difficult when communications and tasks are coming from multiple directions.

THE PROBLEM: INFORMATION OVERLOAD

To measure the effectiveness of the change management strategy, the change management team of Plummer Project conducted quarterly change readiness surveys to gauge readiness and collect feedback from Mayo Clinic's end users and organisational leaders in the months leading up to go-live as well as three months following go-live. Information gathered from the change

readiness surveys served as the basis for continuous improvement for the change management team. Survey results showed that leaders were feeling overwhelmed by the massive amount of project information originating from many different sources, and this became an early target for improvement:

- 'I am too busy to read all of the communications coming out.'
- 'There are too many places to look for information. I don't know where to start.'

Operational leaders reported frustration and difficulty in managing the massive volume of information reaching them from various project teams while continuing to maintain their day-to-day operational responsibilities. Operations managers and administrators are expected to not only support and guide their staff through the stages of change, but also know what is required from a resource standpoint and how many staff will be needed to complete operational responsibilities related to the project beyond training.

The result was a feeling of disconnect between operations and the project. Leaders felt unsupported and ill-equipped in their efforts to move their staff through the changes they were expected to make. The change management team recognised the importance of synthesising and consolidating information for leadership. Leaders needed and deserved an executive guide to help them effectively lead their departments from an operational perspective.

THE SOLUTION: AN OPERATIONAL READINESS PLAYBOOK

A single source of consolidated information, timelines and tasks with links to more detailed information was developed. It was titled, 'Plummer Project Readiness Playbook' and soon became broadly known as 'the playbook' (Figure 2). A playbook is a recognisable term, most commonly known

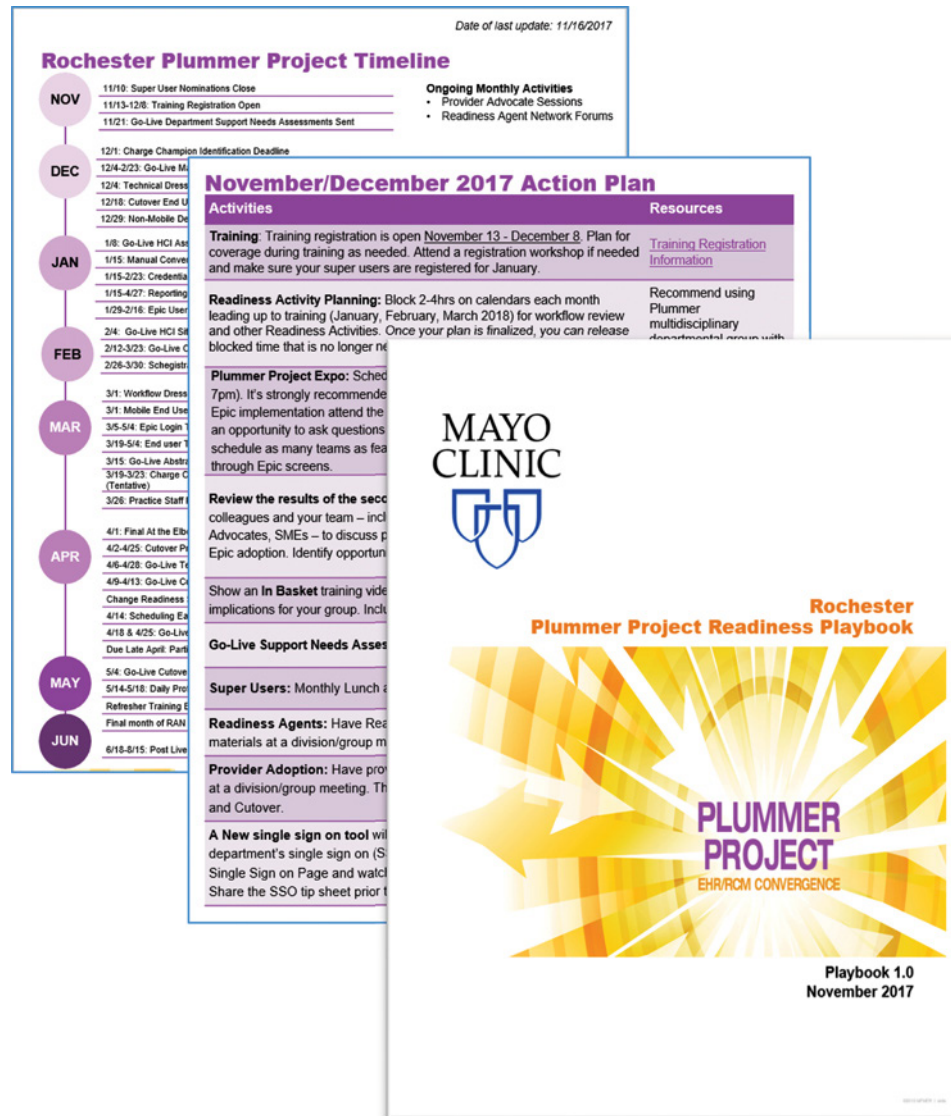


Figure 2: The first playbook created for the Plummer Project

as a document of plays for sports teams to study and memorise in preparation for their game. According to business leader Rob Ristagno, CEO of Sterling Woods, playbooks in business are just as important as they are in sports. 'A business playbook contains all the pieces and parts that make up your company's go-to approach for getting things done. A playbook reflects a plan; an approach or strategy defining predetermined responses worked out ahead of time'.³ With all the moving parts and complex tasks associated

with this project, the only way to keep things running smoothly was to have a plan in place for operational leadership to follow.

The playbook helped leaders see the project overview and tasks from their vantage point, without irrelevant project team tasks and timelines in the mix. This concise and focused document helped to condense the information to only the tasks and information relevant to operational leaders at that point in time. This was an essential aspect of the playbook's usability.

The design left nothing to interpretation and was intended for an audience of practice administrators, operations managers and other clinical practice leaders to have a clear and concise roadmap towards successful implementation of the new EHR/RCM system.

To realise this vision, the change management team collected information on necessary operational tasks from over 40 project team leaders and designated a playbook owner to compile the information into a single, high-level summary accompanied by a month-by-month list of action items or tasks. Administrative resources were leveraged to format the playbook in the most effective way. Once the playbook was drafted, all project team leaders were required to review their relevant portions and validate content for accuracy. Project team leads included clinical informatics leaders and training team leads along with the various Epic application team leads.

The playbook was designed to be published electronically to allow for dynamic updates with links to the most current detailed project information published on the Mayo Clinic intranet. After the edits were completed, the project's directors and administrative sponsors reviewed the content for accuracy and signed off on the draft version before distributing it more broadly. This shared responsibility between the project teams, project directors and sponsors ensured the highest quality product and helped to avoid publishing outdated information.

A full-scale communication plan involving e-mail, newsletter and face-to-face communications was developed to promote the playbook and its intention. Three iterations were planned and executed (labelled versions 1.0, 2.0 and 3.0) to allow additional important pieces of information to be added closer to each go-live. All content additions in versions 2.0 and 3.0 were highlighted in red to facilitate identification of new information.

WHAT TO INCLUDE IN THE OPERATIONAL READINESS PLAYBOOK

The playbook developed for the Plummer Project was divided into sections, each of which was devoted to a topic important for operational owners to understand and act upon:

- Introduction: an explanation of the playbook structure and purpose
- Project scope: to help leaders understand what is changing overall and answer scope questions from their subordinates
- Frequently asked questions: updated to include those questions most often asked by site leaders
- Project summary timeline (Figure 3): This timeline was high level and included relevant month-by-month dates and activities that involved managers and/or their staff. The design was a snapshot suitable for posting quick and easy reference. It was designed to show leaders at a glance what to expect in the immediate future and what to prepare for in the coming weeks or months. Whether in Gantt chart format or any other, this section should be easy to read and understand.
- Monthly action plan pages (Figure 4): Action plans were important for coordination of the various work streams of a large and complex project. These plans were constructed in a monthly format but, depending on the size and scope of the project, could also be formatted weekly or daily. Action plans added specific, detailed tasks to the higher-level project summary timeline. It was important to include activities that would require advanced coordination of staff schedules. Concise formatting of short action plans facilitated easy and frequent reference. Rather than including full detail in the document, links to web resources provided the most up-to-date information to users of the playbook and prevented publishing delays.
- Site and unit change impact reports: This section contained reports or links

Date of last update: 2/7/2018

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Rochester Plummer Project Timeline

Updated

Ongoing Monthly Activities: Provider Advocate Sessions & Readiness Agent Network Forums

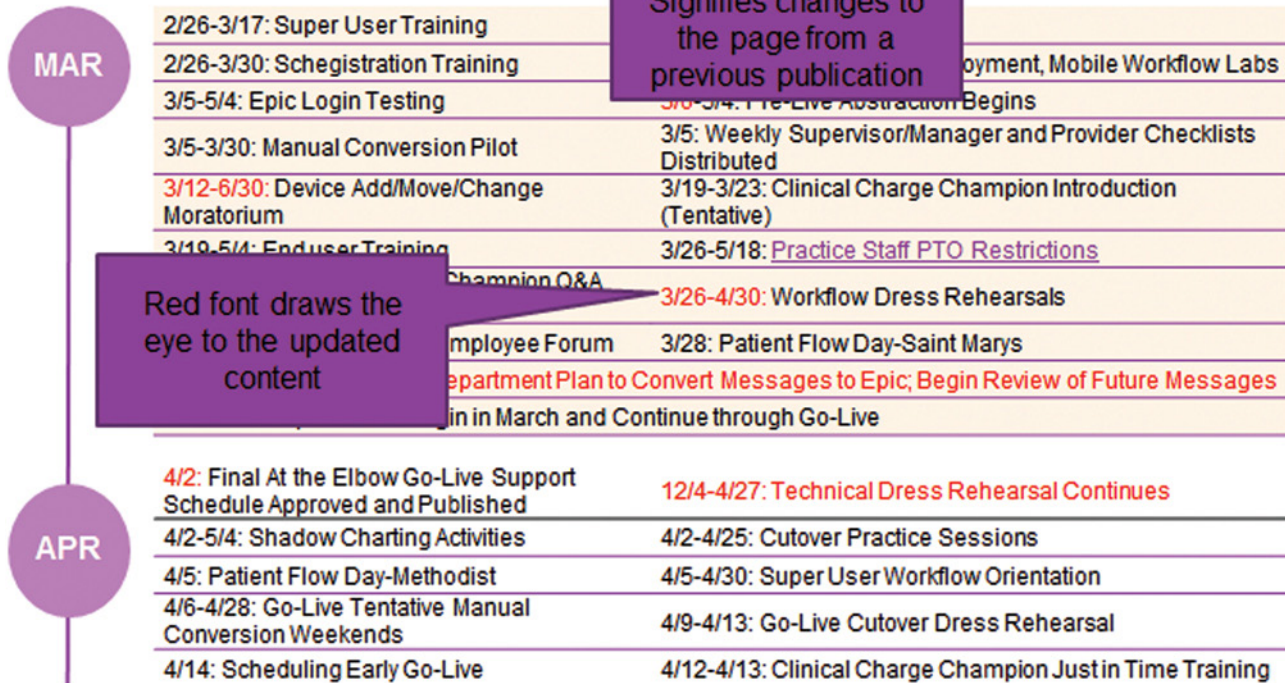


Figure 3: Project summary timeline. Version 3.0 — Calling out new information highlighted in red

to reports from change management analyses of the impact of change and gap analyses on a given segment of the organisation, starting with the larger unit (such as individual sites) and then successively smaller units (such as individual departments and/or divisions). These reports contained information that summarised changes with the greatest potential impact along with recommendations for local leaders to consider as they attempt to mitigate risk for their department. Links to these reports are formatted so that users may read only those applicable to their scope of responsibility without having to scroll through other information.

- Readiness activities: These included a timeline and listing of operations-led and project-led readiness activities. A playbook should include a 'toolkit' of existing activities available to operational leaders with an explanation of the potential benefits of each and how to access or execute each exercise. It should also include all expected readiness activities that will be executed by the project teams such as shadow charting or device testing, specifically what to expect, when the activities are projected to occur, and responsibilities of the operational leaders and their teams in the planning or execution of the activities.

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September 2018 SRO Action Plan

New

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Activities	Resources
Weekly Checklists: The Go-Live checklists will be distributed every Monday. Review for key activities you should be executing.	Providers – The SCOPE Supervisors/Managers – Epic Go-Live Page
Review Patient Education Materials with staff as applicable.	Patient Education
For Staff Rovers : After staff have received their Rover device, they will attend a Workflow Lab drop-in session from 9/18 – 9/20. This is a good opportunity to make sure device bugs are worked out prior to Go-Live. Anyone who would like an opportunity for additional assistance with the devices is encouraged to attend.	Rover Drop-In Lab Schedule Rover Guidebook Rover Setup Video
Super Users: Please attend the Super User Go-Live Orientation Sessions from 9/19 – 9/20.	Go-Live Planning Super User Webpage
Complete the Change Readiness Survey available from 9/7-9/28.	Change Readiness Survey

Links to the most up-to-date project materials

Figure 4: Monthly action plan with links to the latest content

- Last-minute operational execution details: This was a dedicated section for all materials needed at the point of final project execution. For the Plummer Project, these included information on manual data conversion, cutover and downtime specifics for operational areas and at-the-elbow support details. This section would require different content and execution details for other types of projects.
- Reference materials: Centralised location of webpage resources linking to all aspects of the project and all materials helpful for understanding and executing change management within an individual work unit (ie change management self-help materials). This was the largest section of the Plummer Project playbook;

however, the number of pages remained unchanged from the first version to the final version because the content was the same. While it may take considerable time to pull together the relevant materials for this section, it should not require much maintenance after the initial effort. This section included roles and responsibilities of project team members, project governance structure, training plans and a glossary of terms. The Plummer Project introduced an abundance of new terminology that needed to be understood. A glossary was created to define new terms such as the names of the Epic application modules, process step definitions and the name of the new eLearning platform.

Additional information such as outlines of communication plans and how to access additional resources and how for help were also located in this section.

DISCUSSION

Getting started is often the hardest part. A playbook publication project plan that aligns with the overall project plan is an important tool to consider creating as a guide and reference. Playbook planning and development should start with the end in mind (eg the playbook publication date) and align the goals of the playbook with each important step in the draft and review process, each piece of documentation earmarked for operational leadership consumption.

The playbook version 1.0 for the Mayo Clinic Plummer Project was published six months before the third and largest Mayo Clinic Epic go-live, with versions 2.0 and 3.0 published four and two months before go-live. Development milestones are illustrated in figure 5 below. All versions were heavily consumed and relied upon. The playbook intranet versions were accessed more than 3,850 times over the course of six months.

Operational leaders gave positive feedback and stated that the playbook was among the most valuable resources available to them as they prepared for the change in practice

operations. The following are examples of specific feedback provided:

It felt like someone had provided our marching orders.

It was a great resource which provided a single source of truth for the timeline, individual implementation responsibilities and Plummer team contacts.

Monthly activities or events and the reference (terminology) section were very helpful with understanding the difference between various Epic modules, terms, etc. Pre-training and post-training activities were also helpful.

Mayo Clinic's experienced external implementation support partners and consultants relayed to the team that the degree of operational leadership engagement observed and experienced in the execution of the Plummer Project exceeded what they had experienced with other organisations for similar past implementation projects. While many factors contributed to the level of engagement, such as Mayo Clinic's culture calling staff to come together in the best interest of patients, the playbook allowed Mayo Clinic's leaders to carry out those deeply held responsibilities consistently with confidence, empowerment and efficiency.

Playbook 1.0 to Playbook 3.0: Key Milestones

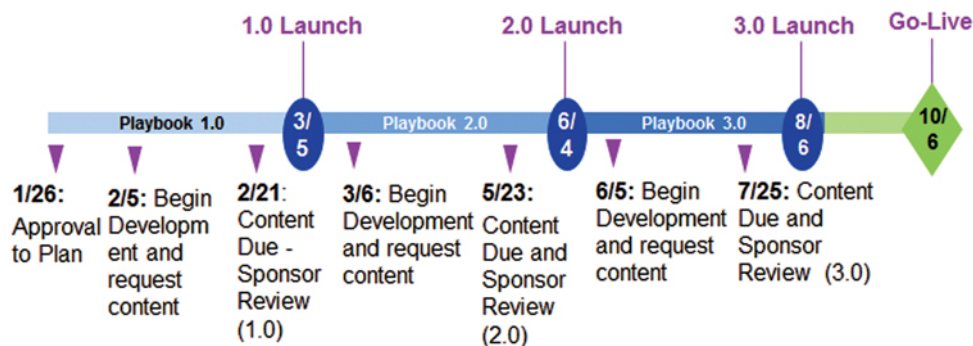


Figure 5: Playbook development milestones

By having a resource like the playbook, operational leaders did not need to resort to numerous separate resources and webpages, endless meetings or desperate phone calls to find out how to support the project effort. They had the plan and resources at their fingertips.

LESSONS LEARNED

The playbook concept itself is easily customisable to match the project's size and scope. This project was extremely large. The playbook concept would be helpful in projects where there are not many resources to help coordinate information sharing. At Mayo Clinic, playbooks have been used in several applications, including talent management and training; there is even a well-being and resiliency playbook. Other applications of playbooks externally may include a guide to a company's methods, processes and procedures, or any situation where an organisation needs to compile and share a variety of content in a meaningful way to ensure consistent operational delivery. In all cases, a playbook lays out a plan to achieve a goal. It is easy for people to relate to, and the concept is scalable to fit with many business applications. With each iteration of the playbook, the team had the opportunity to apply lessons learned and continuously improve it, making a better tool for operational leaders. The following may be noted as the most impactful lessons learned.

- Seek the voice of the customer early rather than waiting for that cry for help.
- Pilot an early draft version with a few important stakeholders to gauge usefulness and relevance.
- Plan the development of a playbook at the beginning of the project, and assign resources for creating and maintaining the playbook because it may be difficult to assign resources midstream.
- Communicate the plan and coordinate with other team members to avoid duplication of effort.

- Put the most important information in the beginning to ensure it catches the reader's attention.
 - Timeline and monthly action lists should take priority over general project information.
- Remove previous versions when publishing a new version of the playbook to minimise outdated information.

To summarise the change management team's lessons learned, having a playbook resource from the very beginning of the Plummer Project would have helped to synchronise communications and avoid duplication of effort, thus minimising confusion and frustration by providing a single source for pertinent, actionable tasks required of operational leaders.

CONCLUDING REMARKS

A playbook can be used in just about any instance where a structured guide is needed to pull together or share a consistent method to meet a common goal. In this example, its intention was to empower operational leaders by providing relevant and time-sensitive information and tasks to facilitate the ownership and local execution of a large transformational project in concert with the project team. It was valuable for clarity, efficiency and cohesiveness. A playbook has proven to be an excellent tool to accomplish project goals and provide deep benefits to the project team and the organisation as a whole.

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