Stakeholders discuss the future of environmental services for health care

The Lead and Operations Team members for the Environmental Services business case met at 3sHealth’s Imagination Space in Regina on September 10 and 11, 2013 to review data that was collected as part of the business case development and to provide direction for the interim report.

Building on the discussions and consensus that stakeholders identified at the Environmental Services Visioning Day in June, the group agreed that the focus for this service is to enhance patient safety through infection prevention and control, improve access to care through better patient flow, increase confidence and satisfaction with facility cleanliness and achieve savings through improved quality and efficiency.

Representatives from Regional Health Authorities (RHAs) and the Saskatchewan Cancer Agency (SCA) included environmental services and infection prevention and control leaders. A patient advisor also attended the meetings. The group listened to presentations and participated in discussions based on data that was gathered in July and August. A large amount of quantitative data was collected using a detailed electronic survey that contained 65 questions regarding region facilities and RHA operations.

In addition to the quantitative data, the group reviewed qualitative data based on extensive site visits. Twenty-six facilities in all twelve RHAs and two SCA facilities were visited. The site visit teams spent 13 days and traveled 5,000 kilometres. They were able to view operations first hand and interviewed over 100 people including health region managers and front-line environmental service workers.

“One of the most consistent themes that emerged from our data collection was the inconsistency across the province,” says Mark Heller, Project Lead for the Environmental Services business case. “There is huge variation in the way Environmental Services is delivered, depending on the community and the facility.”

Consistency, which refers to uniform provincial quality standards, as well as standard processes and province-wide competency-driven training were characteristics that participants unanimously agreed are important for the future state of environmental services. Another “must have” that was identified is a province-wide system to evaluate the achievement of standards once they have been established.

Stakeholders discuss the future... (continued)
Stakeholders discuss the future... (continued)

The group identified other functions that would benefit from provincial coordination including environmental infection prevention and control standards, group purchasing for products and technology, protocols and procedures, employee recruitment and management tools, safe work practices, and staff scheduling.

“Traditionally, environmental services has not been viewed as part of the care team,” said Carol Hildebrand, Regional Manager Environmental and Laundry Services for the Cypress Health Region. “If we establish evidence-based provincial standards and standard work, it would validate the important contribution we make to the patient experience.”

While the presentation of the data highlighted the challenges that are currently present in the system, it also allowed the group to discuss areas that each health region felt could be improved. The sharing of data also allowed some regions to share their successes and innovations in addressing these challenges.

On the second day of the workshop, small groups met to discuss different delivery models for the future state of environmental services. Each group was assigned a different model to discuss: Enhanced Status Quo, Lead Agency, 3sHealth delivered, or Third-Party Provider. Group members were asked to identify how a number of functions including policies and standards, monitoring, metrics and outcomes, workforce, technology, efficiency measures, and cost would be managed under each model. “Pros” and “cons” for each model were discussed with the larger group.

Feedback from attendees will be used by the business case project team to refine the data and build the interim report to be presented to the lead and operations teams at the end of October.

At the end of the two days, the group's wrap-up comments were positive. Many felt that working together as a provincial group would benefit patients and workers by improving quality, safety, and efficiency.

“I am impressed by the knowledge and collective wisdom that is in this room,” said the patient advisor that attended the two-day meeting. “Patients need to understand and appreciate the valuable work that environmental service workers provide.”

3sHealth’s Three-Year Plan for Business Case Development

In March 2013, the Governing Council (Board chairs of the RHAs and SCA) met to approve 3sHealth’s three-year plan for business case development. The plan was carefully developed to identify, evaluate and implement opportunities for shared services across the province. In developing the plan, 3sHealth considered key concepts in the process, stakeholder engagement, and approvals.

One of the key concepts that 3sHealth introduced was the stage-gated decision-making process, which requires project teams to research opportunities in stages and seek approval at each stage’s “gate” before moving forward to the next one. In the first stage, project teams seek a mandate to proceed from health sector leadership, weighing potential impacts on patients, cost savings, and other factors. Once 3sHealth receives authorization to go ahead, it coordinates teams of collaboration from across the province to build the business case. Business cases examine the current state, potential quality improvements, and shared service delivery models. Project teams then present a recommendation to decision-makers, move through the decision gate, and proceed to implementation, the final stage.
The three-year plan also requires a significant level of engagement with stakeholders in the health sector. This element is critical to the success of the business cases because of their shared-services nature. Stakeholder engagement is crucial because input and feedback will both ensure that decisions are made in the best interests of patients and that participants become champions of the process.

Finally, the plan compels 3sHealth to seek approvals on shared services opportunities from its partners in the health system, as well as the 3sHealth Board. This priority acts as an accountability measure, and it ensures that the business case development process is fully collaborative and developing solutions that meet the quality and savings targets of the health system.

Following the approval of the three-year plan, the health regions and Saskatchewan Cancer Agency CEOs met in June 2013 with 3sHealth to review both the process for developing business cases and the connected decision-making process. The group identified several shared services opportunities, and in September the CEOs presented business case development priorities that they felt would have the greatest positive impact on patients and the system as a whole.

Together with the CEOs, 3sHealth identified the following eight priority areas for business case development:

- Supply chain services
- Laboratory services
- Medical imaging services
- Environmental services
- Capital projects
- Enterprise risk management
- Transcription services
- IT/IS Services (Approved in Prov. Hoshin Kanri)

Of those eight areas, three were originally proposed for years two and three of the plan, but CEOs felt that they were high-priority items that should be moved to year one.

As development of the business cases proceeds throughout 2013 and beyond, all levels of the health regions and the Saskatchewan Cancer Agency—from leadership to front-line workers—will continue to be engaged in developing the desired future state for service lines, as well as opportunities in the near term for improved quality and cost savings. In addition to health-care workers, patients and families, physicians, union leadership, and vendors and suppliers are also engaged in the process.

Throughout the development of the business cases, 3sHealth will continue to provide its Board and Governing Council with continual updates on progress, and 3sHealth will require approvals before business cases proceed to implementation.
Each of 3sHealth’s business cases consists of a series of steps, beginning with the creation of a vision and identification of a desired future state at a visioning session comprising participants from across the health sector. Once that direction is set, the project lead teams, consisting of 3sHealth leads and external consultants, conduct a careful current state assessment which includes site tours of facilities across the province, data collection from all of the health regions, engagement of health region employees and patients, and current state validation. After exploring gaps in the data and considering initial options, the project teams develop interim reports, conducting regular Lead and Operations Committee check-ins to identify needs, gaps and opportunities.

Following the interim reports, the project teams complete detailed analyses of the options and write the business case. The team also develops a Kaizen plan, which aims to both outline the actions necessary to reach the project goals and further engage everyone involved in the business case process. 3sHealth then seeks approval from decision-making stakeholders.

Throughout the entire business case process, 3sHealth works to identify “quick wins” that can be implemented in the near term to improve the quality of patient care and produce cost savings for the health system. The organization performs continual checks to ensure that the patient is always placed at the centre and that key partners within the health system are consulted and engaged throughout the process.
Enterprise risk management (ERM)

On September 12, 3sHealth hosted a visioning day for the enterprise risk management (ERM) business case. The session was well attended, and participants examined the current state and identified future state attributes. The day culminated in the creation of the following vision statement:

_Everyone empowered by a comprehensive patient-centred approach to proactively mitigate risks._

Next steps include circulating the visioning day summary presentation to all participants and other key stakeholders, finalizing a common definition of ERM, diving deeper into the current state of ERM with partner organizations, identifying the gap that exists between the current state and the group’s vision, and working with the Lead and Operations Committees to achieve the vision.

Environmental services

The environmental services project team has conducted site tours across the province, visiting over 25 facilities representing all of the health regions as well as the Saskatchewan Cancer Agency. At the end of July, the team launched a quantitative current state survey as part of its data collection effort. The response rate from facilities throughout the data collection phase of the project was high. In August, the project team developed a communications brief to engage and inform employees within the environmental services area. Overall, the team observed a wide and diverse range of environmental services practices, and the performance data shed light on potential best practices. In early September, the Lead and Operations Committee members, as well as patients, infection prevention and control workers, the project consultants and the 3sHealth business development team, gathered for a two-day workshop. Participants previewed a draft summary of the current state of environmental services and were engaged in activities to evaluate the current state in light of the visioning day objectives. The group identified and discussed possible future service delivery models, and all members were able to provide input on each model under consideration. The meeting was an excellent opportunity to build momentum for change, and all participants were eager to identify solutions to build a better environmental services program.

Information technology / information management (IT/IM)

Initiation of the IT/IM business case was co-sponsored with eHealth Saskatchewan in August with the establishment of Project Lead and Operations Committees and a visioning session in early September. Approximately 80 people representing a variety of organizations and disciplines, including three patient/family advisors, participated in the visioning session. The participants shared an array of ideas that helped to form the following vision statement:

_Better health by empowering patients and enabling providers with the right information at the right time through a provincially standardized system that is sustainable and secure._
In addition to the vision statement, the following seven themes emerged from the visioning session:

1. Maintaining a patient focus – putting the patient at the centre
2. Enabling providers
3. Facilitating the flow of information
4. Standardizing processes
5. Strategically enabling the health system
6. Strengthening governance – taking a provincial approach
7. Demonstrating the value proposition and achieving “value” for money

The project teams have conducted site visits, travelling to multiple facilities in each health region and meeting with staff, patients, physicians, and community members to gather input on the current state of medical imaging and medical laboratory services in the province. By the end of the tour, the teams travelled over 7,700 kilometres and visited 34 facilities. The teams are meeting with other key health-care providers and organizations to obtain their perspectives on the current state of medical imaging and laboratory services and their ideal vision for the future state. Patient Advisory Committees were also formed, and they will be included in major review sessions for the first draft of the future state business case recommendations. Physician Advisory Committees were also formed, and these groups will provide feedback on both the current and ideal future states of medical imaging and laboratory services. The teams continue to focus on patient engagement through patient surveys that were collected in the first two weeks of September. In addition to an extensive data collection effort with the health regions, the survey will help the project teams analyze the current state and write the business case interim report early this fall.
Supply chain

In July, the supply chain team compiled and reviewed a summary of current state findings and a list of opportunities for improvement. The team completed its site tours across the province, and analyzed the resulting data as part of the current-state assessment of supply chain processes and roles. In August, the project consultants compiled an interim report, evaluating benefits and options and developing a strategy for establishing an integrated supply chain process. That report is currently under review. The project team also scheduled the following two leading practice site tours: Shoppers Drug Mart Distribution Centre in Cornwall, Ontario on September 18, and the University of Pittsburgh Medical Centre on September 19. These state-of-the-art facilities with fully integrated supply chain processes will serve as examples to help the project team identify best practices and refine their business case recommendations.

Transcription services

Project Lead and Operations Committees were established over the summer, and weekly meetings have taken place. The project’s October 3rd visioning day included over 70 participants. A consulting firm to assist with the business case development work was onboarded in August and site visits are underway.

Workflow optimization

The workflow optimization project consists of payroll, human resources, benefits and staff scheduling services, and its scope includes Gateway Online, staff scheduling, and the Human Resources Information System (HRIS) business case. At the end of July, the HRIS business case was shared via WebEx with the Human Resources Management System Steering Committee and the Gateway Online Steering Committee. The meeting provided these committees with an analysis of the top options presented by the HRIS business case, the recommended Enterprise Resourcing Plan solution, and a transition plan moving forward. On October 15, the HRIS business case recommendation will be presented to the Council of CEOs. August was a busy month for the Gateway Online project team, which tested Bundle Two in preparation for its October launch. The project team continued to demonstrate its commitment to improving human resource processes for the benefit of health sector staff, patients and families by working through tough operational issues. Earlier this year, the project was behind on both budget and timelines due to an increase in the project’s scope. A corrective action plan was developed jointly by the health regions and Saskatchewan Cancer Agency, Cfactor, and 3sHealth to address these issues, and the plan successfully brought the project on track. The corrective action process produced several enhancements that end-users wished to see included, and these were recorded for future consideration. The project team continues to develop a way to prioritize these enhancements so they can be addressed once the project is brought to a close in November.
$10M Savings Target set for 3sHealth

The savings target for shared services over five years, beginning in 2010, is $100M. 3sHealth, together with the 12 Regional Health Authorities (RHAs) and Saskatchewan Cancer Agency (SCA) have exceeded the annual target amount in years two and three. For the 2013 – 2014 fiscal year, the provincial health system has established a target of $10M in new cost savings, making the cumulative savings by March 31, 2014 $59M.

Based on initiatives implemented to date, the projected cumulative savings as we approach the end of the second quarter are $57.9M, positioning us well to achieve the $59M target.

Of the $7.5M in year-to-date available new savings for this fiscal year, $5.43M is the result of group purchasing contracts with national and provincial partners, $1.7M is received from vendor and HealthPRO dividends and rebates, and $308K is for provincial linen quick wins. These third quarter cost savings from provincial shared services will support investments into improved quality for patients and families.

Check your inbox...

Spotlight is a monthly subscriber based e-newsletter designed to inform those working in the health care system and members of the community about the important work 3sHealth is doing. On behalf of, and in partnership with health regions and the Saskatchewan Cancer Agency, 3sHealth is working to create and sustain shared services that will support an optimal health care system for Saskatchewan.

Pass it along to others that might be interested in what’s happening in healthcare.

Get your own copy... subscribe online at 3sHealth.ca