INTEGRATING VIRTUALIZED DESKTOPS INTO THE CHOREOGRAPHED DANCE OF HEALTHCARE

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The way in which health care providers, information and patients flow through a health care delivery system is like a well-choreographed dance.

The order in which each step is delivered, information is accessed, and decisions are made, are clearly defined through disciplined steps and protocols. To ensure the choreography flows smoothly, there is a rhythm between how each member of the care team moves in and out of the care delivery "dance." Within health care, this type of workflow dance is commonly defined as the "Model of Care."

Technology as the Monument: Health care Information Technology (IT) is often perceived as the monument that disrupts the choreographed dance within a care teams' Model of Care. Clinical care teams are focused on providing care to their patients, if they perceive the technology as getting in the way of it, they will work around it. Those detours are costly and render the perception that the technology is broken or obtrusive.

Virtualized Desktop Infrastructure (VDI): The successful transition from personal computer's (PC's) to a Virtualized Desktop Infrastructure (VDI) within a healthcare settings requires a collaborative focus on how People, Processes, Information, and Technology intersect and interact within the Model of Care. Without this understanding, VDI technology can quickly become the monument that is perceived as disrupting the choreographed delivery of patient care, and hence, not fully adopted within clinical workflows, or pulled out in the threat of jeopardizing patient care. Putting the time and effort into the engage, assess and design stages up front of the deployment will increase adoption and prevent costly detours during implementation.

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Defining the Value: One of the first steps when engaging and "marketing" VDI to clinical and operational stakeholders is to define how VDI will benefit their work and why they should look at it as more than just another IT initiative. While the technology is important, the message must focus beyond the technology and more on how it is going to benefit the end-users in doing their jobs and delivering patient care. True transformation requires stakeholders to be engaged and have a vested ownership in redesigning workflows to accommodate the change, and where possible, IT a willingness to make systematic changes to support workflows.

Avoiding Costly Detours: To identify and assess potential impacts to workflows, you first should understand what the current state workflows are. Not what they appear to be on paper, but the real workflows, work-arounds, applications, and adaptations orchestrated by the end-users. The best way to do that is by going to the place where the work is done, engaging the people who do the work, and observing the actual work. The assessments also provide valuable insights that can be used in designing a deployment approach that will minimize impacts to clinical care, capitalize on early wins and prevent costly detours during implementation.

Approach: Beyond the Technology Management (BTM) is an approach DeLappe Consulting has evolved from being a part of the planning and deployment of VDI in dozens of hospitals and hundreds of clinics. The approach facilitates the engagement, assessment and evaluation of current state workflows in preparation for future state technology.

As with a well-choreographed dance, each step within BTM is integrated and dependent upon the one before and the one following. The steps focus on recognizing and understanding how People, Processes, Information, and Technology intersect and interact within the Model of Care.

ENABLE

Develop and enable execution of the plan by start with the voice of the customer.
"Remember, it's not about the technology, it's about developing a marketing message that defines how the technology is going to impact users and help them do their jobs."

ENGAGE

Partner with the people who own the workflows.
"If you truly want to make change, then you need to engage and partner with the people who own what it is you're trying to change. Avoid becoming the monument they detour around."

EVALUATE

Don't assume you know the workflows.
"To capture true workflows, you must go to the actual place where the work is done, talk to the actual people who do the work, and observe the work."

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INNOVATION · OPTIMIZATION · ENGAGEMENT

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DEFINE

Know your audience.
"The message needs to change dependent upon whom you're talking to, what their work entails and how it's going to impact their ability to do it."

EXECUTE

Don't lose sight of why we are all there.
"The flow of patients, care teams and the delivery of patient care should always be taken into consideration when defining the execution approach."

ENHANCE

The best kind of enhancements are those that come from the people who own the work.
"Deploying the technology is just the first step, getting it adopted is the second, and true transformation occurs when those using it start to optimize the use of it in their day to day work."

About DeLappe Consulting

DeLappe Consulting, LLC is a healthcare consulting company that engages with healthcare systems, providers, and their vendor partners to evaluate and deploy innovative healthcare strategies and technologies. While technology is often the catalyst for change, our focus is on engagement with clinical and operational stakeholders, evaluation of clinical workflows, and architecting deployment models that optimize adoption of new and/or evolving technologies within clinical and operational workflows.

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"At DeLappe Consulting, we believe to effectively implement change, you must first understand what it is that you're changing. The delivery of healthcare is no exception. At the forefront of delivering care are people who are passionate about the work they do and the people they care for. Patients first, regardless of how amazing the technology. Hence, to have successful change, workflows must be evaluated with a focus on how the technology not only impacts daily workflows, but more importantly, how it impacts the operational, ancillary and clinical team's ability to deliver patient care."
– Teresa DeLappe