

Distributed Academic Rounds – Emergency Medicine Implementation Plan

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Objective

The objective of this document is to map the needs of the Emergency Medicine department for planning, scheduling, and conducting rounds sessions to the BC Rounds, WebEx, and Video Hosting Platform functionality. This document will identify and distinguish between the needs that can and cannot be mapped to help determine where the use of the service offering could fit into the business workflow. This in turn will allow us to understand how the service offering should be implemented in the Emergency Medicine context.

Pilot Evaluations

The purpose of the evaluations throughout and at the end of the project is to help determine whether the service offering has successfully enabled an easier way for physicians to find out about and access rounds while minimizing or reducing the net level of effort for rounds coordinators. The evaluation questions to keep in mind are as follows:

1. WebEx:
 - a. Was it easy for physicians to connect to a WebEx sessions?
 - b. Were physicians satisfied with the quality of the WebEx sessions? (e.g. audio, video, presentation)
 - c. Was it easy for coordinators to moderate the session?
2. BC Rounds:
 - a. Was information more easily accessible?
 - b. Do physicians like the design/interface and did they find it easy to use?
 - c. Did it help make coordinators’ lives easier?
3. Video hosting platform:
 - a. Were physicians satisfied with the quality of the recorded videos?

- b. Was it easy for the physicians to use the video player?

In addition to these system evaluation questions, we need to be mindful of pilot-specific and lessons learned questions to help inform any future roll-outs, such as:

1. What worked with this particular implementation?
2. What didn't work and can be done better?

The sections below outline the suggested steps for the Emergency Medicine rollout.

Methodology

The current state processes for booking rounds for Emergency Medicine were identified through a one-hour consultation with the Emergency Medicine rounds coordinators. A follow-up meeting was held summarizing the current state process and the proposed workflows for the round coordinator's feedback. The confirmed workflow process incorporating the feedback is used in the next section to determine where the service offering can be best integrated to replace current processes.

Findings

The current state process for scheduling Emergency Medicine rounds is outlined in the table below. The second column provides a detailed breakdown of how the BC Rounds Calendar can be best used in each of the process steps in an operational state. The steps required to implement the service offering and bring Emergency Medicine to an operational state is detailed in the 'Next Steps' section.

Current state process	Service offering process changes
<p>1. The department head (Jim Christenson) is responsible for confirming speakers and dates. The VGH rounds coordinator (Mira Pandya) follows up with the speaker to confirm the title and learning objectives. The title and learning objectives are typically confirmed 1-2 months in advance of the event. This information is tracked in a word document.</p>	<p>BC Rounds Calendar:</p> <ul style="list-style-type: none"> Dates and speakers can be inputted directly in calendar once confirmed. The title can be generic (e.g. Emergency Medicine Grand Rounds) until a formal title is confirmed. <p>WebEx:</p> <ul style="list-style-type: none"> No change/impact. <p>Video Hosting Platform:</p> <ul style="list-style-type: none"> No change/impact.
<p>2. The SPH administrative assistant (Phaedra Bennett) books all required rooms through the UBC FoM room booking service for all UBC rooms, and contacts non-UBC room bookers to book non-UBC rooms (e.g. Whistler). Phaedra requests for each session to be recorded. The room booking information is tracked via email.</p>	<p>BC Rounds Calendar:</p> <ul style="list-style-type: none"> Once rooms are confirmed, they can be added to the existing calendar entries. The Host Site can be selected from a list of pre-populated locations. The other rooms will need to be added to the event description per the standardized nomenclature. <p>WebEx:</p> <ul style="list-style-type: none"> In the short term, Emergency Medicine will have access to a unique WebEx account, which will be provided by the project team. In the long term, WebEx will likely be a bookable resource that can be requested through the standard FoM room booking form. Phaedra would include this as part of her booking process. <p>Video Hosting Platform:</p> <ul style="list-style-type: none"> No change/impact.

Current state process	Service offering process changes
<p>3. The VGH administrative assistant (Chantel Archibald) creates an event on the Emergency Medicine Google calendar, which includes the event date, speaker, title, poster, and learning outcomes. The Google calendar is located on</p>	<p>BC Rounds Calendar:</p> <ul style="list-style-type: none"> • The current Emergency Medicine Google calendar contains other events in addition to the Grand Rounds events. The purpose of BC Rounds is to only contain Grand Rounds events. All of the events from the Google Calendar should not be migrated into BC Rounds. However, the Grand Rounds events can be created and maintained within BC Rounds. A placeholder event can be created within the existing Google calendar, and Chantel can copy and paste a link to each BC Rounds event to direct physicians to the information on BC Rounds. Chantel will only have to update event information in one location to prevent duplication of work. • Within BC Rounds, the event date, division, speaker, title, and learning outcomes can be updated in existing calendar entries once confirmed. The title should replace the generic title so physicians can quickly and easily browse for topics of interest. • The speaker name and learning outcomes can be included in the event description box. The BC Rounds calendar can be embedded in any website for automatic updates. <p>WebEx:</p> <ul style="list-style-type: none"> • A link to join the WebEx session can be included in the BC Rounds event. <p>Video Hosting Platform:</p> <ul style="list-style-type: none"> • A placeholder link to view the video recording can be included in the BC Rounds event. The link will be updated after the session.

Current state process	Service offering process changes
<p>4. Mira sends a reminder email through the Emergency Medicine mailing list 2 weeks prior to the event. The reminder email includes the event date, speaker, title, and learning outcomes. Mira also provides the list of currently booked rooms, and requests participants to contact her if they would like rooms booked other locations.</p>	<p>BC Rounds Calendar:</p> <ul style="list-style-type: none"> • An email template can be created in the calendar to brand a notice that can be printed to physically post. Information in the calendar will be auto-populated to the notice for each event. • The calendar sends the event information using the email template created at a time pre-determined by the rounds coordinator through the system. Currently, each physician must be manually added as a user within BC Rounds in order to receive the reminder email. The calendar vendor (CalendarWiz) is planning to rollout a mail-to-list feature in November 2014 which will eliminate the need for adding users within the system. <p>WebEx:</p> <ul style="list-style-type: none"> • A link to join the WebEx session can be included in the reminder that is sent from BC Rounds. <p>Video Hosting Platform:</p> <ul style="list-style-type: none"> • No change/impact.

Current state process	Service offering process changes
<p>5. Jim attends every event at the location the speaker is presenting from. A MedIT technician also attends to provide technical support. Events are typically hosted from SPH, however they are hosted in other locations (e.g. Victoria) depending on the speaker. Before the session, Jim asks the speaker to sign a consent form for uploading a video recording of the session to youtube. Jim gives the signed consent form to Mira after the event.</p> <p>The presentation is around 45 minutes long. The speaker typically uses powerpoint, but may also show documents and videos. Document cameras are not used. Jim acts as the moderator during the event and facilitates a 15 minute Q&A after the main presentation.</p>	<p>BC Rounds Calendar:</p> <ul style="list-style-type: none"> No change. <p>WebEx:</p> <ul style="list-style-type: none"> A WebEx moderator will be required to facilitate questions via chat, and to mute/unmute user microphones. The WebEx moderator can attend at the event location, and is in addition to Jim’s current role. The WebEx moderator will pass along questions from the chat to Jim, who will then decide which questions to ask to the presenter. <p>Video Hosting Platform:</p> <ul style="list-style-type: none"> No change. The consent form can still be signed by the presenter, and passed along to Mira via Jim.
<p>6. A link to the video recording of the session is sent to Phaedra by the UBC FoM room booking team after each session. Phaedra forwards the link to Mira, who forwards it to Chantel. Chantel uploads the video to YouTube and posts a link to it on the Emergency Medicine department website. The videos are publicly accessible, however a link to the videos are not sent out.</p>	<p>BC Rounds Calendar:</p> <ul style="list-style-type: none"> The BC Rounds event can be updated after every session to include a link to the recorded video. <p>WebEx:</p> <ul style="list-style-type: none"> No change/impact. <p>Video Hosting Platform:</p> <ul style="list-style-type: none"> MedIT is responsible for hosting and uploading a video recording, and will provide a link to Phaedra. Phaedra can forward the link to Chantel, who can post the link to the Emergency Medicine department website.

Analysis

Based on the findings in the previous section, the service offering is able to accommodate the needs of Emergency Medicine Grand Rounds.

However, there are some functionalities that the BC Rounds calendar can accommodate less ideally in all departments. The table below lists these limited functionalities and mitigation strategies.

Functionality limit and risk	Mitigation strategy
1. Locations other than the main host site cannot be added to the browse list. Users will be able to search specific locations but will not be able to choose their location from the dropdown menu if the location is not considered a host site.	Training and communications to users must reinforce this idea and set expectations and guidelines for search and browse capabilities.
2. All rounds coordinators are added to the BC Rounds as administrators, instead of managers. This is required so that they can add/remove users in the system for the purposes of email reminders. Consequently, rounds coordinators are capable of accidentally editing/deleting events from other departments.	Training and communications to rounds coordinators to ensure they only adjust events that are their own. Risk is completely mitigated when the mail-to-list feature is introduced in 2014.

Implementation next steps

The rounds coordinators must first confirm that the risks, mitigation strategies, and recommendations are accurate and acceptable (**go, no-go decision point**). If the decision is to go ahead with the implementation, the following steps will need to occur:

1. Create usernames for rounds coordinators.
2. Add host site locations with standardized nomenclature into BC Rounds.
3. Add users into BC Rounds using the standardized nomenclature.
4. Bulk migrate any existing events into BC Rounds calendar.
5. Confirm location on website for embedding BC Rounds calendar.
6. Confirm location on website for embedding recorded videos.
7. Confirm WebEx moderator.
8. Provide WebEx and BC Rounds training.
9. Distribute best practices/training documentation to rounds coordinators.
10. Distribute marketing and communications material to physicians to set user expectations.
11. Monitor processes after go-live and track issues and feedback.