

# D6.1 Specification of Common Operational Support Activities WP6: Service Deployment

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### Document information

#### Abstract

WP6 is focused on the operation of the integrated care services defined and set up in previous WPs, and on the correct functioning of the systems. This document describes the common activities to perform so as to guarantee the adequate provision of the integrated care services and their quality, the proper operation support services, and the activities to register information that can be broadcast among different stakeholders and other regions wanting to implement similar activities.

#### Key words

Service Operation, support, help desk, quality assurance, broadcasting, issues, risks, solutions

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#### Statement of originality

This deliverable contains original unpublished work except where clearly indicated otherwise. Acknowledgement of previously published material and of the work of others has been made through appropriate citation, quotation or both.

### Executive summary

This document provides a description of the actions to be performed once the sites have started the provision of integrated care services to their target population. The operation of processes is to be maintained and full quality and support services are to be provided to guarantee the correctness of the performance of the services.

In addition to the support and the quality guarantee, a log of operational activities and incidents is required. The RAIL web tool has been implemented within the project for this purpose, permitting to monitor risks and register actions that were put in place in response to risks encountered, issues that arise, and lessons learned. This tool is supported in a database of excel spreadsheets.

The RAIL tool will permit not only registration of information and experiences, but it can also be used as a tool to refer to when looking for other's experiences, and a repository of knowledge. All the findings will be shared by all pilot sites and WP leaders, supporting the latter in coordinating their WP more effectively.

This tool will be completed by all pilot sites, and the promotion of its use will be realised at the WP leader bi-weekly telcos.

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## 1. Introduction

### 1.1 Purpose of this document

In previous SmartCare work packages, the different short-term and long-term integrated care protocols have been defined, the information systems and IT architectures have been set up and, during WP5, all sites have worked on the different activities for the preparation of the start of the provision of care.

Now, WP6 is focused on the operation of those integrated care services and the correct functioning of the systems. This document describes the common activities to be performed so as to guarantee the adequate provision of integrated quality care, the proper operation of the provision of attention to actors, and the activities to register information that can be broadcast to different stakeholders and other regions wanting to implement similar activities.

### 1.2 Structure of document

Different activities will have to be performed so as to guide the operation of the provision of services. The document is structured into five sections that describe the following:

- Section 2: Activity to be performed according to the DoW.
- Section 3: Quality assurance: the first section will describe the activities to perform to guarantee the quality of the provision of services.
- Section 4: Support services: How to set up a help service to respond to problems.
- Section 5: Broadcasting of experiences: Describes the mechanisms agreed to collect and permit broadcasting the sites' experiences.
- Section 6: Dedicated to the RAIL tool, implemented specifically for the project, that describes how to use it to collect operational activities, as well as its use to support the broadcasting of experiences.

### 1.3 Glossary

<b>HCP</b>	Healthcare Professional
<b>ICT</b>	Information and Communication Technology
<b>RAIL</b>	Risks, Actions, Issues and Lessons <ul style="list-style-type: none"> <li>• Risk: an uncertain event or condition that, if it occurs, has an effect on at least one project objective.</li> <li>• Issue: an unplanned event that has happened and requires management action.</li> <li>• Action: the fact or process of doing something in response to a risk or issue.</li> <li>• Lessons learned: knowledge or understanding gained by experience that has a significant impact for an organisation. The experience may be either positive or negative.</li> </ul>
<b>SCP</b>	Social Care Professional

## 2. Background: Work to be done according to the DOW

According to the DoW, the work described for this work package collects the tasks to be done to ensure the operation of activities during the provision of integrated care, ensuring the quality of the processes, and providing support when required to the actors involved in the process of provision of care. In addition, it promotes the dissemination of operational experiences, so as to improve the learning from early adopters for the benefit of later deployment sites.

As the DoW states, there are 9 tasks, one per site, whose leader is each region. Each task has the same wording:

“Task 6.x: Operation of Site X, Deployment site (M16 - M36) - Lead: Site X

Operation of all services at each site is to be maintained at full quality. A team is set up by the site manager to provide support and address maintenance and system operational problems which may occur during operation. The deployment site operation team is led by deployment site management organisation and supported by core team staff. This task is carried out at deployment site level only (except for coordination / overall report).

A help service is set up and run to respond to problems faced by staff users and by clients. This team is operational at each site, supported by the core team.

The deployment sites hold regular webinars and workshops with the other active deployment sites to provide a forum for deployment sites not yet active / early adopter organisations to learn from their pioneer peers.

Between broadcast sessions, the deployment site manager collates reports of issues met and addressed in service implementation and operational maintenance. The issue list is used as a basis for informing those responsible for deployment sites not yet active / early adopters”

The following sections describe the methodology and the actions performed to meet these requirements.



### 3. Quality assurance

#### 3.1 Task context

“Operation of all services at each site is to be maintained at full quality.”

**Quality** is a basic tool that allows comparison between similar activities, but this noun may have multiple meanings. In this operational work package, we define quality as “operational quality”, that is, *ensuring that the processes of provision of care are maintained on the basis of the procedures and steps defined in the service provision pathways, defined in WP1 and WP2*. The compromise would be to guarantee that the procedure of provision of integrated services is offered in a suitable, effective and adequate manner according to the pathways defined, the organisations involved, and needs of the market, sectors, and actors involved.

#### 3.2 Description

The commitment of each region will be to set up a “quality team” that will ensure compliance with the project requirements, the defined procedures and steps, as well as providing support when necessary to ensure the quality of the operations performed.

The objectives of the operational quality team would be to:

- Ensure compliance with the processes defined in the SmartCare pathways (described in WP1 and WP2).
- Assign responsibilities of these processes to actors.
- Define the limits of the processes.
- Measure the operation of the process.
- Redesign the process to work better.

This team will be led by the management organisation and in coordination with the core team staff. It may also require coordination with the help services, and will be available during the whole duration of the provision of services.

**Table 1: Quality Assurance Team Description**

QUALITY ASSURANCE TEAM DESCRIPTION	
<b>Objective</b>	Assure the quality of the processes during the operation of systems.
<b>How</b>	By providing support and addressing maintenance and system-operation-problems which may occur.
<b>Milestone</b>	Creation of a <u>Quality Assurance Team</u> .
<b>Who</b>	<ul style="list-style-type: none"> <li>• Led by the management organisation.</li> <li>• Supported by the core team staff.</li> <li>• Coordination with help services.</li> </ul>
<b>When</b>	During the whole process, from initial full operation to end of provision of services.
<b>Where</b>	At each site.

### 3.2.1 Reporting

Each site will report a description of the implementation of its quality assurance team. It will be based on a description of the configuration of the team, the tasks planned, and those tasks actually performed. The description will follow a common template, with the following proposed Table of Contents, that will be included in deliverable D6.2.

**Table 2: Quality Assurance Team Description - Table of Context**

<b>Quality Assurance Team Description Table of Contents</b>
<b>Section A: Team configuration</b> <ul style="list-style-type: none"><li>• Profile of people involved.</li><li>• Role of each profile.</li><li>• Where they are located.</li><li>• Types of task expected.</li><li>• Plan of tasks.</li></ul>
<b>Section B: Site quality team self-assessment</b> <ul style="list-style-type: none"><li>• Self description of the work performed by the quality team.</li><li>• Topics:<ul style="list-style-type: none"><li>○ Description of the work performed.</li><li>○ Tasks actually performed.</li><li>○ Issues / incidents solved.</li><li>○ Performance.</li></ul></li></ul>

## 4. Help Desk Support

### 4.1 Task context

Help desk services are responsible for addressing issues and problems that actors may face during the operation of integrated care services. A help service is to be set up and run to respond to problems faced by users, both staff and care recipients. This team will be operational at each site and will be supported by the core team.

### 4.2 Description

Table 3: Help Services Description

Help Services Description	
<b>Objective</b>	Provide help support
<b>How</b>	By responding to problems faced by users, both staff and care recipients. Note, it is not a call centre (where users ask for integrated care services) but a help service to solve <u>technical</u> issues or SmartCare-related <u>operational</u> questions.
<b>Milestone</b>	Implementation of a Help Service.
<b>Who</b>	Identification of a person / unit to respond, supported by the core team staff.
<b>When</b>	During the whole process, from initial full operation to end of provision of services.
<b>Where</b>	At each site.

#### 4.2.1 Configurations

Multiple configurations of help services are possible to respond to the different issues that may occur in the different aspects of the operation of services.

Some help services may be oriented to resolve technical issues that may occur in the use of the information and communication technologies (ICT); while others can be oriented to guide the operation and steps of the defined processes of provision of integrated care. Others, on the other hand, may be oriented to end users' requests and needs.

The following table shows a proposal for the different configurations that can be implemented; although they are not all mandatory, each region should provide support services for the topics described.

Table 4: Help Services Configuration

Help Services Configurations			
	<u>Help desk</u>	<u>Process support</u>	<u>Call centre</u>
	IT support		
<b>Targeted at:</b>	HCP SCP End users	HCP SCP	Users
<b>Profile of people:</b>	IT	Service operational Management	Healthcare staff Social staff
<b>Responds to topics:</b>	use of technology IT support	Operational issues (pathways) Provision of service related Processes Ethical/legal	Demand requests

#### 4.2.2 Reporting

As with the quality assurance team, each site will report a description of the implementation of its help services. The description will follow a common template, with the following proposed table of content, that will be included in deliverable D6.2.

Table 5: Help Services Description - Table of Content

Help Services Description Table of contents
<b>Section A: Team form-up</b> <ul style="list-style-type: none"> <li>• Profile of people involved.</li> <li>• Role of each profile.</li> <li>• Where they are located.</li> <li>• Types of task expected.</li> <li>• Schedule (operational from x to x , etc..).</li> </ul>
<b>Section B: Processes to solve issues</b> <ul style="list-style-type: none"> <li>• Description of the methodology /process to respond to issues.</li> </ul>
<b>Section C: Site help support activity</b> <ul style="list-style-type: none"> <li>• Activity performed.</li> </ul>
<b>Section D: Site help support services self-assessment</b> <ul style="list-style-type: none"> <li>• Performance and self assessment.</li> </ul>

## 5. Service operation record & Broadcasting of experiences

The SmartCare Consortium is formed of regions already implementing integrated care services, and those regions that plan to implement similar services in the future. Early adopters are going through a process that can be very instructive for not-yet-active regions, which could learn from others' previous experiences.

Therefore, a detail plan has been defined with the following objectives:

- Collect experiences on the operation of integrated care services in different domains.
- Promote the sharing of knowledge between sites and partners within the Consortium.

### 5.1 Service Operation record

In order to be able to disseminate experiences, it is essential to collect the steps, actions and experiences that each site has experienced, providing a context for risks faced, actions performed, issues that have occurred, and solutions implemented to successfully deploy integrated services in the territory.

Therefore, during the operation of integrated services, the deployment site manager collates reports of issues met and addressed in service implementation and operational maintenance. The issue list is used as a basis for informing those responsible for not-yet active deployment sites / early adopters.

A tool has been implemented in the context of the SmartCare project, in order to collect all the feedback; this is discussed in section 6 on the RAIL tool.

### 5.2 Broadcasting of experiences

Broadcasting of experiences can be performed in several ways. The SmartCare Consortium is very big, and interactions are difficult to manage among so many actors. Therefore, a communication strategy has been defined so as to promote communication among partners and dissemination of lessons learnt.

Broadcasting is therefore promoted by three channels to permit synchronous/asynchronous communication and face-to-face and virtual meetings.

- Use of mailing lists: Use of emailing distribution lists ([smartcare\\_all@googlegroups.com](mailto:smartcare_all@googlegroups.com)) where all partners are included to allow asynchronous communication among sites. This method will be used for questions & answer on specific topics that may be considered for further explanation.
- Dedicated sessions in workshops: Dedicated timeslots or parallel sessions can be included on Consortium meetings, for example General Assemblies or Workshops. The objective is to promote communication among partners and sharing of knowledge.
- RAIL tool: This tool will be the key way to learn from others. The database of operational experiences is enriched by a web portal that permits reading the background and histories of others in different domains. See section 6 on the RAIL tool, to learn how to access the database of operational experiences.

Table 6: Communication Strategy

Communication channels	Who participates	Description
1. Asynchronous communication channel among sites (early adopters and observers).	All sites.	Using SmartCare <u>distribution lists</u> for questions & answers on certain topics.
2. Include timeslots in General Assemblies, workshops & webinars.	All sites.	Including a timeslot in the <u>already planned workshops</u> to discuss operational issues.
3. Reporting tool RAIL.	All sites to upload experiences. All members to read.	<u>Online tool</u> with restricted access to disseminate experiences among sites.

## 6. RAIL tool

### 6.1 Purpose

Lessons learned are a matter of improving the productivity and efficiency of a process. Organisations often overlook their own experiences as a platform for learning. They assume that their collective experiences are passed along to the next person or group. But learning organisations must be proactive, capture lessons learned, and spread the concepts by exposing their experiences to others who may benefit from them. The application of lessons learned helps produce project teams which operate with less risk of failure, increased efficiency, and more awareness of their surroundings.

The RAIL tool has been implemented within the context of the SmartCare project, as one of the activities led by the WP6 leader. The RAIL tool is a database of information that collects the experiences of the sites in different operational domains, supported by a web portal.

This tool has two main objectives, as stated on the previous section:

1. to collect the experiences faced by each sites to successfully deploy integrated care services; and
2. promote the dissemination of knowledge within the SmartCare Consortium.

All members of the sites should contribute to the logging of their experiences, which should be led by the Site Manager. The log should be accessible to others in the organisation, so that it can be used as a planning tool for future projects, and so the same mistakes can be avoided.

### 6.2 Access

Several methods of access are available. Access is available through the private section of the SmartCare web portal <http://pilotsmartcare.eu>.

Also, although the web portal is not public and cannot be found in web directories such as google, there is a direct link to the RAIL tool by using the direct URL:

- <http://www.pilotsmartcare.eu/RAIL>; or
- <https://sites.google.com/site/smartcareoperational>.

#### 6.2.1 Visibility

Visibility must be granted to be able to access the database of information; this must be requested from SmartCare WP6 leaders. Currently, all SmartCare members have access to read and write.

The figures below show screen shots of the RAIL tool.



Figure 1: Learning experiences

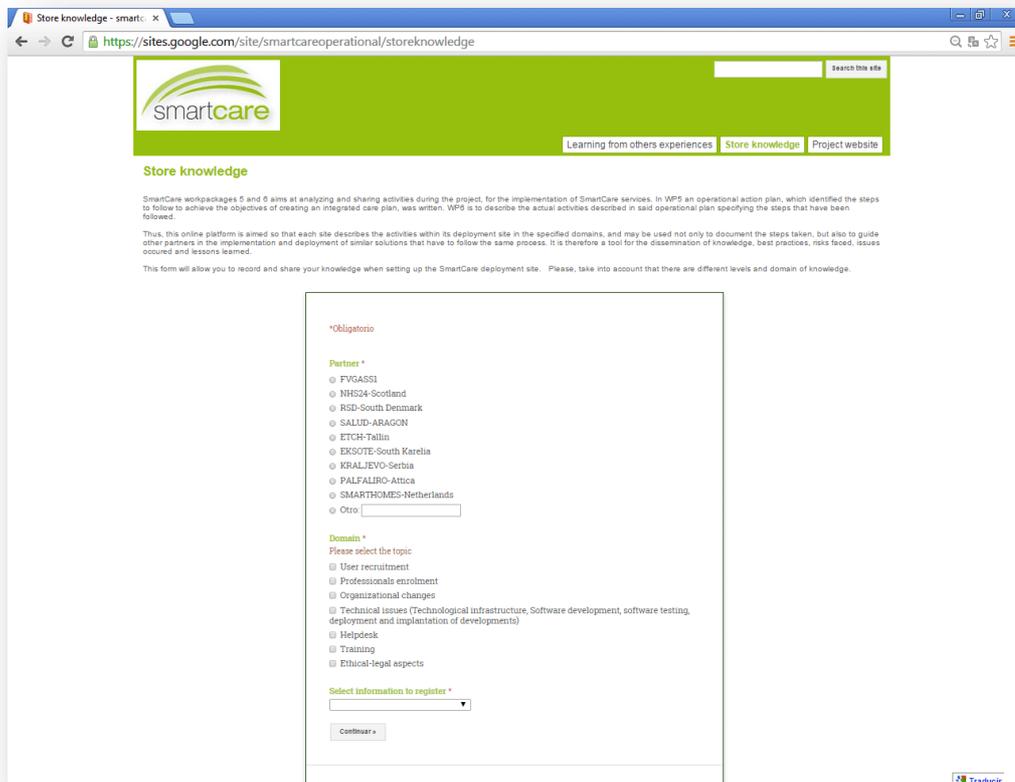


Figure 2: Storing experiences

## 6.3 Domains

The operation of integrated care services is performed in different domains of intervention. The agreed domains to collect information in the RAIL tool are:

- **User recruitment:** Reports the activity and challenges in the process of recruiting users who will participate in the project.
- **Professional enrolment:** Participation of healthcare and social care professionals is a must for the provision of care.
- **Training:** Collect the operation of training programmes.
- **Organisational changes:** Integrated care services, empowering of actors and transfer of competences may occur in organisational changes. This domain collects the issues that occurred with this.
- **Technical Issues:** Issues may occur in the use of technology. This domain will collect the issues and responses to these incidents.
- **Ethics and Data protection:** addresses the challenges regarding the regulations for ethics and data protection.
- **Help Support:** Help services reporting.



Figure 3: Operational Domains

## 6.4 Storing operational experiences

### 6.4.1 The Context

The database of raw data will permit extracting the lessons learned and allow teams to benefit from the knowledge gained through the experiences of those who have implemented integrated care services before them.

Lessons learned is useful project management information gained through experience that organisations should retain for future use, and that can be relevant to other organisations. Depending on the lesson, it could be a valuable technique or an outcome to be repeated, or it could be an undesirable result to be avoided.

It is important to note that an effort must be carried out when writing “raw” experiences so that they will be valid, relevant and useful for both the reporting organisation and others. Only if the context is provided can conclusions be drawn and lessons learnt that are relevant.

A set of questions will be asked in order to detail the experience faced:

- What are the risks we previewed in each domain?

- What are the actions we have performed in a certain domain to make processes work?
- What are the issues we have encountered and what approach / strategy have we followed to overcome / solve them?
- With all the risks, actions and issues that occurred in a domain, what are the conclusions / lessons we have gained?

Therefore, the risks present us with the potential barriers we may encounter, and lead us to the actions we will have to perform. The actions are those activities that we have carried out to make services operational and at full quality. Issues always occur and make us define strategies or put in place mitigation plans to overcome them. Lessons learnt are knowledge acquired from the experience that leads to a process improvement.



### 6.4.1.1 Risks

Risks need to be identified, assessed and controlled to help make your pilot implementation successful. Risks may turn into issues if the conditions which give rise to the risk occur; the mitigating actions which were identified as part of the risk management approach (defined in WP5 Preparation of Sites) may also be appropriate to address issues.

The first step will be to identify the risks that the site might face in the operation of processes, and to understand the actions that will need to be put in place to mitigate risks, by identifying the operational objectives and considering the events that may impact on the achievements of these objectives.

### 6.4.1.2 Actions

Once the risks have been identified, and how they should be treated before they become issues, mitigation actions will be put in place. Action items are part of an action plan, and are a key component of successful project management, helping you to summarise how you have been working to achieve the project objectives.

### 6.4.1.3 Issues

An issue is an unplanned event that has happened and requires management action. An issue might be a concern, query, suggestion, a request for change or anything else to do with the SmartCare pilot site.

## 6.4.2 How to use RAIL to store experiences

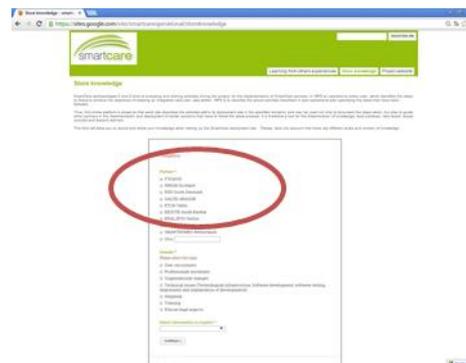
The web portal offers a web form to store the experiences in the different domains in a private database that will, afterwards, be exploited. This web portal permits entry of information in an easy manner, and solves the tedious and difficult management of databases administration.

The actor / organisation that gained the experience is introduced, together with the domain of activity and item of context to include, followed by a detailed description.

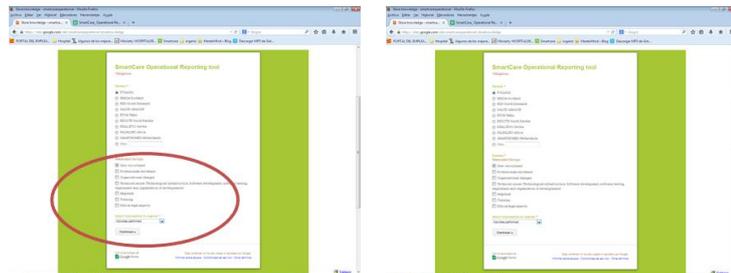
Step 1: Select “Store knowledge” on the web portal



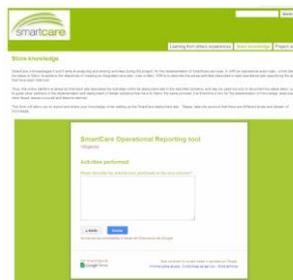
Step 2: Select your site



Step 3: Select the domain and type of info



Step 4: Enter experience



### 6.4.3 Recommendations

Different recommendations can be followed so that the description of the experiences is the most valuable possible, such as:

- Being very detailed on each of the experiences, by providing a complete description and not a summary.
- Information is based on the experience, as they come from the operation of systems.
- Using verbal tense that reflect the reality of the operations sequence.
  - issues / solutions: Use past forms, instead of future;
  - risks: use future;
  - activities: use present or past.

Therefore, in order to record the information into the database, the context must be provided.

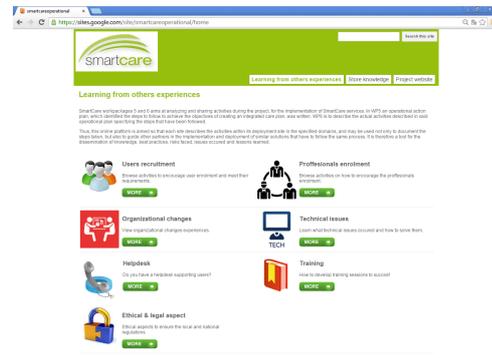
## 6.5 Obtaining knowledge

### 6.5.1 How to use RAIL to view experiences

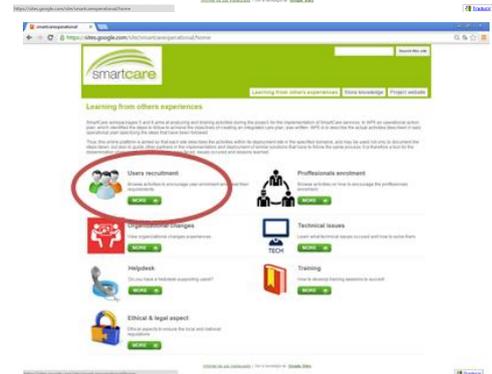
The web portal has a second section that permits access to the database of information in order to view others' experiences.

The user selects the domain to look at. Identification is required, that in order to protect the information from unauthorised access. Data protection is ensured by providing access only to the SmartCare Consortium.

Select the “Learn from other experiences” option.



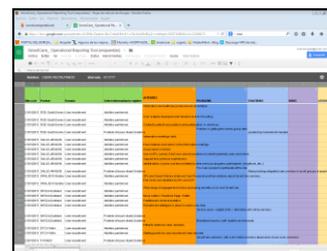
Select the domain to learn from.



Log in with your account details.



You will be shown the database with information filtered to the domain you want to learn from.



The database of raw information can be exported into different file formats (such as xls, pdf, cvs, zip) for manipulation, so that management of the information is possible and according to the reader's needs.

### 6.6 Synergies with other projects

Sharing information with other European integrated care services projects (CareWell and BeyondSilos) has been agreed, using the same RAIL tool. After the end of the projects, this will allow drawing lessons across-projects' commonalities and learning.

### 6.7 Risks to RAIL

Regardless of any contractual arrangements, the collection of information of quality and value into the RAIL tool is conditional on the active participation and commitment from all parties and sites for it to realise its full potential for success.

Mitigation plans such as periodic email reminders, summaries of experiences stored, promotion at planned meetings, parallel sessions, training programmes, etc. will be performed so as to promote the use of the tool by all partners.

## 7. Conclusions

The initial work on WP6 has been to define a methodology of work and provide online, agile, and easy-to-use tools to the Consortium. This methodology is a guideline so as to better document and guide the operation of integrated care services, creating teams that monitor the quality of the procedures of service provision, and that provide support to the actors involved. These tools will also permit the documentation of the activities and issues that occur during the implementation of the SmartCare pathways and the services provision.

The methodology intends to guide the sites to the achievement of results, and the collection of experiences so as to be able to summarise their knowledge and offer it to the follower regions that wish to learn from previous practices.

Some of this strategy has also been defined for similar projects, and SmartCare, BeyondSilos and CareWell will be using the same sharing-of-knowledge tool. This will permit the projects to increase the power of experiences gained, and enable the comparability and drawing of conclusions.