The overriding mission of the quality assurance and patient safety body in a hospital environment is to advance learning and system-wide improvements throughout the healthcare center and its clinics. The challenge is to keep on top of the many individual quality initiatives running at any one time, while also ensuring that the appropriate care standards are observed.

All hospitals are expected to adhere to a set of core care measures, developed by the Joint Commission – the national standard-setting and accrediting healthcare body – to optimize the quality of care through a standardized performance measurement system. These core measures are primarily derived from a set of quality indicators defined by the Centers for Medicare and Medicaid Services (CMS) and have been proven to reduce the risk of complications, prevent recurrences and otherwise enhance the treatment of patients, by focusing on the actual results of care.

Two of the key success factors that are often overlooked but which contribute significantly towards mastering the above challenge are Portfolio Project Management (PPM) and the Project Management Office (PMO).

The PMO, typically led by the Clinical Quality Director or Chief Quality Officer, is an organizational entity responsible for centralized and coordinated management of those projects under its domain. While PPM is a systematic approach to prioritizing goals and initiatives, the PMO is an operative body which takes those initiatives and makes sure they are being managed properly. In our example of a quality and patient safety department, both the PPM and the PMO functions are blended together in one function.

Defining the Project Management Structure

The PMO acts as the operative management body for all projects, programs and portfolios within its scope.

The first step in the structuring process is to define and prioritize the goals of the hospital and quality management department, so that the projects which are then selected align with the overall strategy. Manual or software-based decision support procedures are ideal for this stage.
The second step involves defining what constitutes a project, how projects interrelate into a program and then identifying how these programs pursue clearly outlined portfolio objectives i.e. the main priorities of the hospital. A project can be explained as a temporary endeavor undertaken to create a unique product, service or result, over a specified time period. A program is a group of related projects coordinated to obtain benefits and a level of control not possible by individual project management. Programs may also include elements of related work outside the scope of the specific projects in the program. Finally, a portfolio describes a collection of programs, projects and other works that are grouped together to facilitate effective management of the work entailed in order to meet strategic business objectives. The projects or program in the portfolio may not necessarily be interdependent or directly related.

<table>
<thead>
<tr>
<th>Structure</th>
<th>Roles Involved</th>
<th>Main responsibilities</th>
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<tbody>
<tr>
<td>Portfolio level</td>
<td>Steering Members</td>
<td>Cross-functional portfolio management and Steering Committee Management of portfolio</td>
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<tr>
<td>Program level</td>
<td>Executive Sponsor</td>
<td>Chair Program Steering Group Management of program to deliver benefits</td>
</tr>
<tr>
<td>Project level</td>
<td>Project Managers</td>
<td>Overall responsibility for successful planning, execution, monitoring, control and closure of project Achieve results specified in project charter Provide regular updates to PMO</td>
</tr>
<tr>
<td></td>
<td>Project Leads</td>
<td>Responsible for leading a specific project workstream and reporting to the Project Manager</td>
</tr>
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</table>

The type of PMO design used for a certain healthcare center depends on the portfolio complexity, competency of project managers and maturity of each program and project. There are 3 distinct PMO models and the aim is to focus on that which meshes best with your organization. A strategic PMO is best suited for a large-scale organization taking on many different projects and needing a stronger centralized force. The service model calls on PMO resources and tools to take on the project management aspect of each project. The functional model focuses on getting projects to a “functional” level. In this case, the PMO provides the methodology and a high presence during initiation and planning but its involvement drops during execution.

- Project managers are responsible for PM implementation
- PMO supports and monitors project managers
- CPMO responsible for projects initiation, prioritization, portfolio management
- PMO responsible for PM implementation, with PMs support
- PMO collects data for decision making
- PMO implements the methodology decided upon
- “Functionally” focused
- Create PMO expertise
- Relevant mainly for “set-up” phase
The Project Lifecycle and Tools

The PMO’s involvement at the project level will be framed around the project lifecycle. The major categories usually inherent in a lifecycle include the initiation phase, planning, executing and controlling and, finally, the closing phase. Depending on the ambitions of your organization, it may also make sense to add in an opportunity identification phase. Once you have set up the project chronology and timeline through a lifecycle, it is essential to define the activities, deliverables, and decisions that occur at each phase. These activities will build your process while the deliverables will be the tools that support the activities.

Initiation phase – The essential tool at this stage of the project is the project charter. The charter should define the project at a high level and include the following components:
- Problem statement
- Project objectives
- Project goals
- Team leads and members
- Expected benefits
- Constraints
- Dependencies

Planning phase – Planning is more than just listing out the tasks of a project. It is critical that the project manager answers the following questions when planning the project:
- What is the expected project outcome?
- How will the work be done?
- What do you expect of the project team members?
- Who reports to whom?
- When will the work be performed?
- Are there any costs associated with the work?
- Who will be affected by the change?
- When will the team meet?
- Who is required to attend the meetings?
- How will minutes be recorded?

The work plan is the primary tool that the project manager should use during this phase. The “perfect” work plan will include all project related tasks and key milestones with specific timeframes. In addition the work plan will list the individuals or teams responsible for each task. Another important tool is the risk register. Mitigating risks is an important responsibility of the project manager and the whole team should support it by pointing out possible barriers to the project.

Execution phase – plans remain merely good intentions unless they rapidly translate into hard work. The execution phase is when the project team begins to realize the initiatives and tasks set out in the work plan. Clear communication and coordination are essential. At this stage, the PMO is responsible for getting the project moving and tracking implementation. This phase has many parallels with the monitoring stage and involves keeping a close eye on all issues and risks. To accomplish this in an efficient manner, the project manager and PMO will set up regular meetings, usually every fortnight, to review the work plan throughout the duration of the project. Issues which cannot be resolved during this meeting will be elevated to a senior level committee.

Monitoring and controlling phase – during execution of the project, it is critical to monitor the Key Performance Indicators (KPIs). Each KPI should have a target established and be measured on a weekly basis. KPIs are typically managed through dashboards which help visualize project progress and keep track of goals, budget, and schedule. Dashboards can be developed using business intelligence software or through Microsoft Excel.

Closing phase – a project is complete when it starts working for you, rather than you working for it. Once a project is closed there are a number of activities that can be considered. The first activity should be to review project performance and discuss lessons learned. In addition, the project manager should consider archiving project files in a centralized database so that materials can be easily accessed for future projects. Finally the team itself should receive recognition and celebrate its achievements!
Conclusion

A study conducted by the Project Management Institute revealed that more than 90% of projects fail to meet their objectives. Applying the tools and methodologies discussed above within a hospital's quality department will generate far reaching and multi-dimensional benefits. The PMO and its processes help prevent the variability of the past and create standardization across projects, increasing the overall success rate.

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